| Fill in this information to identify your case: |  |                                    |
|---|--|------------------------------------|
| United States Bankruptcy Court for the :        |  |                                    |
| NORTHERN District ofILLINOIS(State)             |  |                                    |
| Case Number (If known):                         | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | Check if this is an amended filing |

### **Official Form 101**

### **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Identify Yourself   |                            |   |
|----|---|----------------------------|---|
|    |   | About Debtor 1:            | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name  |                            |   |
|    | Write the name that is on your                                      | Barbara                    |   |
|    | government-issued picture identification (for example,              | First name                 | First name                                    |
|    | your driver's license or  | Lacretia                   |   |
|    | passport).  | Middle name                | Middle name                                   |
|    | Dring vous pieture  | Henderson                  |   |
|    | Bring your picture identification to your meeting with the trustee. | Last name                  | Last name                                     |
|    |   | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III)                    |
| 2. | All other names you   |                            |   |
|    | have used in the last 8   | First name                 | First name                                    |
|    | years   |                            |   |
|    | Include your married or maiden names.                               | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
|    |   | First name                 | First name                                    |
|    |   | 1.100.100.110              |   |
|    |   | Middle name                | Middle name                                   |
|    |   | Last name                  | Last name                                     |
| 3. | Only the last 4 digits of   |                            |   |
| J. | your Social Security  | xxx - xx - <u>3620</u>     | XXX - XX                                      |
|    | number or federal<br>Individual Taxpayer                            | OR                         | OR  |
|    | Identification number   | <b>9</b> xx - xx           | 9xx - xx                                      |

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Document Henderson Barbara Lacretia Debtor 1 Case Number (if known)

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|----|--|---|---|
| 4. | Any business names<br>and Employer<br>Identification Numbers | I have not used any business names or EINs.   | I have not used any business names or EINs.   |
|    | (EIN) you have used in the last 8 years                      | Business name   | Business name   |
|    | Include trade names and doing business as names              | Business name   | Business name   |
|    | g  | EIN   | EIN — - — — — — — —   |
|    |  | EIN   | EIN   |
| 5. | Where you live   |   | If Debtor 2 lives at a different address:   |
|    |  | 2820 E 142nd Street   |   |
|    |  | Number Street   | Number Street   |
|    |  | Durahara II COCCO   |   |
|    |  | Burnham         IL         60633           City         State         ZIP Code  | City State ZIP Code   |
|    |  | COOK  |   |
|    |  | County  | County  |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |
|    |  | Number Street   | Number Street   |
|    |  | P.O. Box  | P.O. Box  |
|    |  | City State ZIP Code   | City State ZIP Code   |
| 6. | Why you are choosing   | Check one:  | Check one:  |
|    | this district to file for bankruptcy.                        | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                            |
|    |  | have another reason. Explain. (See 28 U.S.C. § 1408   | ☐I have another reason. Explain.<br>(See 28 U.S.C. § 1408   |
|    |  |   |   |
|    |  |   |   |
|    |  |   |   |

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Lacretia

Barbara

Debtor 1

Document Henderson

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Part 2: **Tell the Court About Your Bankruptcy Case** Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals The chapter of the Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Bankruptcy Code you are choosing to file Chapter 7 under ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No bankruptcy within the <sub>District</sub> None last 8 years? \_\_\_\_\_ When \_\_\_ ☐ Yes. Case Number MM / DD / YYYY District None \_\_ When \_\_\_ \_\_\_ Case Number \_\_\_ MM / DD / YYYY \_\_\_ When \_\_\_ \_\_\_\_\_ Case Number \_\_\_ MM / DD / YYYY No 10. Are any bankruptcy cases pending or being filed by a spouse who is Yes. not filing this case with \_\_\_\_\_ When \_\_\_\_ Case Number, if known \_\_\_\_\_ you, or by a business MM / DD / YYYY parter, or by affiliate? Relationship to you \_ When Case Number, if known \_\_\_\_\_ District MM / DD / YYYY 11. Do you rent your ☐ No. Go to line 12 residence? Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

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Barbara Lacretia Debtor 1 Case Number (if known)

| 12. | Are you a sole proprietor of any full- or part-time business?  A sole proprietorship is a  | ■ No.<br>□ Yes. | Go to Part 4.<br>Name and location of l          | business                                |                |
|-----|--|-----------------|--|---|----------------|
|     | business you operate as an individual, and is not a separate legal entity such as  |                 | Name of business, if any                         |   |                |
|     | a corporation, partnerhsip, or<br>LLC.  If you have more than one<br>sole proprietorship, use a<br>separate sheed and attach it<br>to this petition. |                 | Number Street                                    |   |                |
|     | to and poulon.   |                 | City   |   | State Zip Code |
|     |  |                 | Check the appropriate                            | box to describe your business:          |                |
|     |  |                 | ☐ Health Care Bus                                | iness (as defined in 11 U.S.C. § 101(2  | 7A))           |
|     |  |                 | ☐ Single Asset Rea                               | al Estate (as defined in 11 U.S.C. § 10 | (51B))         |
|     |  |                 | ☐ Stockbroker (as                                | defined in 11 U.S.C. § 101(53A))        |                |
|     |  |                 | ☐ Commodity Brok                                 | er (as defined in 11 U.S.C. § 101(6))   |                |
|     |  |                 | ☐ None of the above                              | /e                                      |                |
|     | For a definition of small business debtor, see 11 U.S.C. § 101(51D).   | _               | the Bankruptcy Code.                             | 11, but I am NOT a small business de    | -              |
| Par | Report if You Own or Hav   | e Any Hazard    | lous Property or Any Prop                        | perty That Needs Immediate Attention    |                |
|     |  |                 |  | •                                       |                |
| 14. | Do you own or have any property that poses or is   | No.             |  |   |                |
|     | alleged to pose a threat of imminent and   | Yes.            | What is the hazard?                              |   |                |
|     | indentifiable hazard to  |                 |  |   |                |
|     | public health or safety?   |                 |  |   |                |
|     | Or do you own any property that needs immediate attention?   |                 | If immediate attention is                        | needed, why is it needed?               |                |
|     | Or do you own any property that needs  |                 | If immediate attention is                        | needed, why is it needed?               |                |
|     | Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building    |                 | If immediate attention is Where is the property? |   |                |
|     | Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building    |                 |  |   |                |
|     | Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building    |                 |  |   | State ZIP Code |

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Debtor 1

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Barbara

Lacretia

Case Number (if known) \_

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

15. Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):   |
|---|---|
| You must check one:   | You must check one:   |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.  | I received a briefing from an approved credit<br>counseling agency within the 180 days before I<br>filed this bankruptcy petition, and I received a<br>certificate of completion.   |
| Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.  |
| I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.   | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.   |
| Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   | Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.   |
| I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   | I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.   |
| To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  | To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.  |
| Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. | Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you for You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.  Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. |
| I am not required to receive a briefing about credit counseling because of:   | I am not required to receive a briefing about credit counseling because of:   |
| Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  | Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.  |
| Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.  | Disability. My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.  |
| Active duty. I am currently on active military duty in a military combat zone.  | Active duty. I am currently on active military duty in a military combat zone.  |
| If you believe you are not required to receive a  | If you believe you are not required to receive a  |

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

| ebtor 1                    | Case 17-3618   |  | led 12/05/17<br>Document<br>Henderson   | Entered 12/05/17 1<br>Page 6 of 58   |  |  |
|----------------------------|--|--|---|--|--|--|
| 02101                      | First Name   | Middle Name  | Last Name   | Case Maniper   | (  |  |
| Part 6                     | Answer These Question  | ns for Reporting Purposes  |   |  |  |  |
|                            | Vhat kind of debts do<br>ou have?  | as "incurred by  No. Go to I  Yes. Go to  16b. Are your deb  money for a bu  No. Go to I  Yes. Go to   | an individual primarily<br>ine 16b.<br>line 17.<br>ts primarily busine<br>siness or investment<br>ine 16c.<br>line 17.  | mer debts? Consumer debts are of y for a personal, family, or household personal, family, or household personal, family, or household personal pers | d purpose."  bts that you incurred to obtain ness or investment.   |  |
|                            | re you filing under  | No. I am not f   | iling under Chapter 7.  | Go to line 18.   |  |  |
| D<br>a<br>e<br>a<br>a<br>a | o you estimate that after ny exempt property is xcluded and dministrative expenses re paid that funds will be vailable for distribution o unsecured creditors? |  |   | o you estimate that after any exempt<br>aid that funds will be available to dist   |  |  |
| у                          | low many creditors do<br>ou estimate that you<br>we?   | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999  |   | □ 1,000-5,000<br>□ 5,001-10,000<br>□ 10,001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than 100,000   |  |
| е                          | low much do you<br>stimate your assets to<br>e worth?  | \$0-\$50,000<br>\$50,001-\$100,0<br>\$100,001-\$500<br>\$500,001-\$1 m   | ,000  | □ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million  | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion  |  |
| е                          | low much do you<br>stimate your liabilities<br>o be?   | ■ \$0-\$50,000 □ \$50,001-\$100,0 □ \$100,001-\$500 □ \$500,001-\$1 m  | ,000  | □ \$1,000,001-\$10 million □ \$10,000,001-\$50 million □ \$50,000,001-\$100 million □ \$100,000,001-\$500 million  | \$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion  |  |
| Part 7                     | Sign Below   |  |   |  |  |  |
| For yo                     | pu   | correct.  If I have chosen to fil of title 11, United Sta under Chapter 7.  If no attorney represe this document, I have I request relief in acc | e under Chapter 7, I a<br>tes Code. I understar<br>ents me and I did not<br>e obtained and read the<br>ordance with the chap<br>a false statement, co-<br>se can result in fines of | e under penalty of perjury that the in am aware that I may proceed, if eliging the relief available under each chapay or agree to pay someone who is the notice required by 11 U.S.C. § 34 oter of title 11, United States Code, succealing property, or obtaining money to \$250,000, or imprisonment for   | ble, under Chapter 7, 11,12, or 13 apter, and I choose to proceed s not an attorney to help me fill out 12(b). specified in this petition. ey or property by fraud in connection |  |
|                            |  | ✔ /s/ Barhara  | l acretia Hender  | son 🗸  |  |  |

Voluntary Petition for Individuals Filing for Bankruptcy

Signature of Debtor 1

Signature of Debtor 2

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Debtor 1 Barbara Lacretia Henderson Case Number (if known)

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| ✗ /s/ Jon Kurt Clasing           | Date      | Date: 12/05/201             |           |  |
|----------------------------------|-----------|-----------------------------|-----------|--|
| Signature of Attorney for Debtor | Date      | MM / DD / YYYY              |           |  |
| Jon Kurt Clasing                 |           |                             |           |  |
| Printed name                     |           |                             |           |  |
| Geraci Law L.L.C.                |           |                             |           |  |
| Firm name                        |           |                             |           |  |
| 55 E. Monroe St., #3400          |           |                             |           |  |
| Number Street                    |           |                             |           |  |
|                                  |           |                             |           |  |
| Chicago                          | IL        | 60603                       |           |  |
| City                             | State     | ZIP Code                    |           |  |
| Contact Phone 312-332-1800       | Email add | <sub>dress</sub> ndil@gerad | cilaw.com |  |
| 6301418                          | IL        |                             |           |  |
| Bar number                       | State     |                             |           |  |

# Official Form 106Sum

### **Summary of Your Assets and Liabilities and Certain Statistical Information**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Part 1: | Summarize Your Assets  |   |
|---------|--|---|
|         |  | <b>Your assets</b><br>Value of what you own |
|         | dule A/B: Property (Official Form 106A/B) Copy line 55, Total real estate, from Schedule A/B   | <u> </u>                                    |
| 1b. C   | copy line 62, Total personal property, from Schedule A/B   | \$ 20,850                                   |
| 1c. C   | copy line 63, Total of all property on Schedule A/B  | \$ 20,850                                   |
| Part 2: | Summarize Your Liabilities   |   |
|         |  | Your liabilities<br>Amount you owe          |
|         | dule D: Creditors Who Have Claims Secured by Property (Official Form 106D) opy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$20,108                                    |
|         | dule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) opy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F                           | \$0   |
| 3b. C   | opy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F   | \$29,564                                    |
|         |  |   |
| Part 3: | Summarize Your Liabilities   |   |
|         | dule I: Your Income (Official Form 106I) y your combined monthly income from line 12 of Schedule I   | \$3,571.47                                  |
|         | dule J: Your Expenses (Official Form 106J) y your monthly expenses from line 22c of Schedule J   | \$3,520.00                                  |

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Document Henderson Barbara Lacretia Case Number (if known) \_ Debtor 1

Last Name

| Part 4: Answer These Questions for Administrative and Statistical Records  |                                  |
|--|----------------------------------|
| 6. Are you filling for bankruptcy under Chapter 7, 11 or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the Yes  | court with your other schedules. |
| <ul> <li>7. What kind of debt do you have?</li> <li>Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual p family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.</li> <li>Your debts are not primarily consumer debts. You have nothing to report on this part of the form this form to the court with your other schedules.</li> </ul> | S.C. § 159.                      |
| 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.   | Official \$ 4,203.23             |
| 9. Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :  From Part 4 of Schedule E/F, copy the following:  | Total claim                      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$_0.00                          |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$_0.00                          |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$ 0.00                          |
| 9d. Student loans. (Copy line 6f.)   | \$ <u>17,299.00</u>              |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)   | \$_0.00                          |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)   | \$_0.00                          |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$ <u>17,299.00</u>              |

First Name

Middle Name

|  | Caso 1 <sup>-</sup>  | 7 26190 Doc 1   | Eilod 12/05/17   | Entered 12/05/17 17  | 7:07:18 De             | sc Main  |
|--|--|---|--|--|------------------------|--|
| Fill in this in                                    | formation to ide   | ntify your case and this fil  |  | 0 of 58  |                        |  |
| Debtor 1   | Barbara  | Lacretia  | Henderson  |  |                        |  |
|  | First Name   | Middle Name   | Last Name  |  |                        |  |
| Debtor 2<br>(Spouse, if filing)                    | First Name   | Middle Name   | Last Name  |  |                        |  |
| United States                                      | Bankruptcy Court fo  | or the : <u>NORTHERN</u> Distri   | ict of _ <u>ILLINOIS</u>   |  |                        |  |
| Case Number  |  |   | (State)  |  |                        | Check if this is an  |
| (If known)   |  |   |  |  |                        | amended filing   |
| Official F   | <u>orm 106A</u>  | <u>/B</u>   |  |  |                        |  |
| Schedul  | e A/B: Pr  | operty  |  |  |                        | 12/15  |
| ategory where<br>esponsible for<br>ages, write you | you think it fits<br>supplying corre<br>ur name and cas<br>Describe Each Re  | best. Be as complete and a<br>ct information. If more spa<br>e number (if known). Ansv<br>sidence, Building, Land, or C | accurate as possible. If two ma<br>ace is needed, attach a separate  |  | ooth are equally       |  |
|  | -  | -   | our entries fro Part 1, including  | g any entries for pages  | >                      |  |
| you have at  | llacileu foi Part  | . Write that number here  |  |  | . <del></del> -        | \$0.00   |
| Part 2:  | Describe Your Vel  | nicles  |  |  |                        |  |
| No. Yes.  No. Yes.  No. Yes.  No. Yes.  No. Yes.   | Describe  Make:  Model:  Year:  Approximate Milea  Other information:  2017 Chevrolet Smiles  t, aircraft, motor  Boats, trailers, motor  Describe | onic with over 11,000  homes, ATVs and other re   | Who has an interest in the purpose of the debtors o | and another  nity property (see  cles, and accessories accessories | the amount of any secu | claims or exemptions. Put ured claims on Schedule D: laims Secured by Property  Current value of the portion you own?  13,000.00 |
|  |  |   | our entries fro Part 2, including  |  |                        | \$ 13,000.00   |
|  |  |   |  |  |                        |  |
| Part 3:  | Describe Your Per  | sonal and Household Items   |  |  |                        |  |
| Do you own o                                       | r have any legal   | or equitable interest in any  | y of the following items?  |  |                        | Current value of the portion you own?  Do not deduct secured claims or exemptions  |
|  |  | nishings<br>urniture, linens, china, kitchenw   | vare   |  |                        |  |
| Yes.   | Describe   | Furniture, table & chairs, bedr   | room set   |  | \$1,000                | \$ <u> </u>  |

Official Form 106A/B Record # 753156 Schedule A/B: Property Page 1 of 6

Barbara

Case 17-36180 Doc 1

Desc Main

| <br>       |        |
|------------|--------|
| First Name | Middle |

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| 07. Electro   |  |  |  |
|---|--|--|--|
| Exam  | ples: Televisions  | and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music  |  |
| collec  | tions; electronic  | devices including cell phones, cameras, media players, games   |  |
| │   | 10.  |  |  |
| Y   | es. Describ  | e  |  |
| _   |  | Flat screen TV, DVD player, cell phone \$650   |  |
|   |  |  | \$650.00   |
| 08. Collec  | tibles of value  |  |  |
| Exam  | ples: Antiques a   | nd figurines; paintings, prints, or other artwork; books, pictures, or other art objects;  |  |
|   |  | all card collections; other collections, memorabilia, collectibles   |  |
| N   | lo.  |  |  |
| I ⊟√  | es. Describ  |  |  |
| Щ,  | es. Describ  | G  | \$ 0.00  |
| 00 Equip  | mont for one   | to and habition  | <b>3</b>   |
|   | -  | ts and hobbies   |  |
|   |  | otographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes tools; musical instruments  |  |
| _   |  | tous, musical institutions   |  |
| <b>     </b>  | lo.  |  | -  |
| L   | es. Describ  | e  |  |
|   |  |  | \$ <u>0.0</u> 0  |
| 10. Firear  | ms   |  |  |
| Exam  | ples: Pistols, rifle   | es, shotguns, ammunition, and related equipment  |  |
| N   | lo.  |  |  |
|   | es. Describ  | 9  |  |
| ᆸ   | CO. Describ  | ·····  | \$ 0.00  |
| 11. Clothe  |  |  | <u> </u>   |
|   |  | lothes, furs, leather coats, designer wear, shoes, accessories   |  |
|   |  | notries, tals, leather coals, designer wear, snoes, accessories  |  |
| │   | lo.  |  | _  |
| Y   | 'es. Describ   | e  |  |
|   |  | Everyday clothes \$300   |  |
|   |  |  | \$300.00   |
| 12. Jeweli  | 'n   |  |  |
|   |  | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,   |  |
| Exam  | pies: Everyday j   | swelly, coclaine jewelly, engagement ringe, wedaling ringe, helicom jewelly, wateries, genie,  |  |
| Exam<br>gold,   |  | Short, coolding Johan, Gigagonian Hilgs, heading migs, hemooni johan, walcites, gents,   |  |
| gold,   |  | uncing, coolding joiners, engagement mige, meading mige, nember joiners, wateries, gents,  |  |
| gold, s   | silver<br>Io.  |  | 7  |
| gold, s   | silver   | e  |  |
| gold, s   | silver<br>Io.  | e  | s 100.00   |
| gold, s   | silver<br>Io.<br>′es. Describ  | e  | \$ <u>100.0</u> 0  |
| gold, s   | silver<br>lo.<br>'es. Describ<br>arm animals   | e  Everyday jewelry, costume jewelry  \$100  | \$ <u>100.0</u> 0  |
| gold, s   | silver No. Yes. Describ  Arm animals ples: Dogs, cats  | e  Everyday jewelry, costume jewelry  \$100  | \$ <u>100.0</u> 0  |
| gold, s   | silver lo.  'es. Describ  arm animals ples: Dogs, cats lo.   | e  Everyday jewelry, costume jewelry  \$100  birds, horses   | \$ <u>100.0</u> 0  |
| gold, s   | silver No. Yes. Describ  Arm animals ples: Dogs, cats  | e  Everyday jewelry, costume jewelry  \$100  birds, horses   | ]  |
| gold, s   | silver lo.  'es. Describ  arm animals ples: Dogs, cats lo.   | e  Everyday jewelry, costume jewelry  \$100  birds, horses   | \$ <u>100.00</u>   |
| gold, s   | silver lo.  'es. Describ  arm animals ples: Dogs, cats lo. 'es. Describ  | e  Everyday jewelry, costume jewelry  \$100  birds, horses   | ]  |
| 90ld, s   | silver lo.  'es. Describ  arm animals ples: Dogs, cats lo. 'es. Describ  | e  Everyday jewelry, costume jewelry  \$100  birds, horses  e  | ]  |
| 90ld, s   | ilver lo.  'es. Describ  arm animals ples: Dogs, cats lo.  'es. Describ  ther personal lo.   | e  Everyday jewelry, costume jewelry  \$100  birds, horses  e  and household items you did not already list, including any health aids you did not list  | ]  |
| 90ld, s   | in the resonal   | e  Everyday jewelry, costume jewelry  \$100  birds, horses  e  and household items you did not already list, including any health aids you did not list  | \$0.00   |
| 90ld, s   | in i   | e  Everyday jewelry, costume jewelry  \$100  birds, horses  e  and household items you did not already list, including any health aids you did not list  e   | ]  |
| 90ld, s  13. Non-fa  Exam  14. Any of                               | in i   | e  Everyday jewelry, costume jewelry  \$100  birds, horses  e  and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached  | \$0.00   |
| 90ld, s  13. Non-fa  Exam  14. Any of                               | in i   | e  Everyday jewelry, costume jewelry  \$100  birds, horses  e  and household items you did not already list, including any health aids you did not list  e   | \$   |
| 90ld, s  13. Non-fa  Exam  14. Any of                               | rm animals ples: Describ res. Describ   | e  Everyday jewelry, costume jewelry  \$100  birds, horses  e  and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached thumber here   | \$   |
| 90ld, s  13. Non-fa  Exam  14. Any of                               | rm animals ples: Describ res. Describ   | e  Everyday jewelry, costume jewelry  \$100  birds, horses  e  and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached  | \$   |
| 13. Non-fa Exam  14. Any of  15. Add th  for Par                    | arm animals ples: Dogs, cats to.  'es. Describ ther personal to. 'es. Describ ther personal to.  'es. Describ ther personal to.  'es. Describ ther personal there personal ther personal there personal ther personal there pe | Everyday jewelry, costume jewelry  birds, horses  e  and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached thumber here  cour Financial Assets  | \$\$   |
| 13. Non-fa Exam  14. Any of  15. Add th  for Par                    | arm animals ples: Dogs, cats to.  'es. Describ ther personal to. 'es. Describ ther personal to.  'es. Describ ther personal to.  'es. Describ ther personal there personal ther personal there personal ther personal there pe | e  Everyday jewelry, costume jewelry  \$100  birds, horses  e  and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached thumber here   | \$   |
| 13. Non-fa Exam  14. Any of  15. Add th  for Par                    | arm animals ples: Dogs, cats to.  'es. Describ ther personal to. 'es. Describ ther personal to.  'es. Describ ther personal to.  'es. Describ ther personal there personal ther personal there personal ther personal there pe | Everyday jewelry, costume jewelry  birds, horses  e  and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached thumber here  cour Financial Assets  | \$ 0.00 \$ 0.00 \$ 2,050.00  Current value of the portion you own?                                 |
| 13. Non-fa Exam  14. Any of  15. Add th  for Par                    | arm animals ples: Dogs, cats to.  'es. Describ ther personal to. 'es. Describ ther personal to.  'es. Describ ther personal to.  'es. Describ ther personal there personal ther personal there personal ther personal there pe | Everyday jewelry, costume jewelry  birds, horses  e  and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached thumber here  cour Financial Assets  | \$ 0.00  \$ 0.00  \$ 2,050.00  Current value of the portion you own?  Do not deduct secured claims |
| 13. Non-fa Exam  14. Any of  15. Add th  for Par                    | arm animals ples: Dogs, cats to.  'es. Describ ther personal to. 'es. Describ ther personal to.  'es. Describ ther personal to.  'es. Describ ther personal there personal ther personal there personal ther personal there pe | Everyday jewelry, costume jewelry  birds, horses  e  and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached thumber here  cour Financial Assets  | \$ 0.00 \$ 0.00 \$ 2,050.00  Current value of the portion you own?                                 |
| 13. Non-fa Exam  14. Any of  15. Add th  for Par                    | arm animals ples: Dogs, cats to.  'es. Describ ther personal to. 'es. Describ ther personal to.  'es. Describ ther personal to.  'es. Describ ther personal there personal ther personal there personal ther personal there pe | Everyday jewelry, costume jewelry  birds, horses  e  and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached thumber here  cour Financial Assets  | \$ 0.00  \$ 0.00  \$ 2,050.00  Current value of the portion you own?  Do not deduct secured claims |
| 13. Non-fa Exam  14. Any or  15. Add th for Par  Par: 45  Do you ov | rm animals ples: Dogs, cats lo.  res. Describ ther personal lo. res. Describ ther personal to. res. Describ ther personal there personal ther personal there personal ther personal there p | Everyday jewelry, costume jewelry  birds, horses  e  and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached thumber here  cour Financial Assets  | \$ 0.00  \$ 0.00  \$ 2,050.00  Current value of the portion you own?  Do not deduct secured claims |
| 13. Non-fa Exam  14. Any of  15. Add th for Par  Part 4:  Do you ov | rm animals ples: Dogs, cats lo.  res. Describ ther personal lo. res. Describ ther personal to. res. Describ ther personal there personal ther personal there personal ther personal there p | e  Everyday jewelry, costume jewelry  birds, horses  e  and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached at number here >  Your Financial Assets  y legal or equitable interest in any of the following? | \$ 0.00  \$ 0.00  \$ 2,050.00  Current value of the portion you own?  Do not deduct secured claims |
| 13. Non-fa Exam  14. Any of  15. Add th for Par  Part 4:  Do you ov | rm animals ples: Describ ther personal to.  Yes. Describ ther personal to. Yes. Describ ther personal to. Yes. Describ ther personal to. Yes. Describ ther personal to. Yes. Describ ther personal to. Yes. Describ ther personal to. Therefore the personal to. Therefore the personal to.  | Everyday jewelry, costume jewelry  birds, horses  e and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached a number here   | \$ 0.00  \$ 0.00  \$ 2,050.00  Current value of the portion you own?  Do not deduct secured claims |
| 13. Non-fa Exam  14. Any of  15. Add th for Par  Part 4:  Do you ov | arm animals ples: Dogs, cats to.  'es. Describ ther personal to. 'es. Describ ther personal to.  'es. Describ ther personal to.  'es. Describ ther personal to.  'os. Describ ther personal to.  | Everyday jewelry, costume jewelry  birds, horses  e and household items you did not already list, including any health aids you did not list  e  of all of your entries from Part 3, including any entries for pages you have attached a number here   | \$ 0.00  \$ 0.00  \$ 2,050.00  Current value of the portion you own?  Do not deduct secured claims |

Debtor 1

Barbara Case 17-36180 Lacretia

Doc 1

Desc Main

Middle Name

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| 17. | Deposits o   | f money             |                                   |  |    |        |
|-----|--------------|---------------------|-----------------------------------|--|----|--------|
|     | Examples:    | Checking, savings   | s, or other financial accounts; c | certificates of deposit; shares in credit unions, brokerage houses,        |    |        |
|     |              |                     |                                   | with the same institution, list each.                                      |    |        |
|     | No.          |                     | •                                 |  |    |        |
|     | <b>=</b> .,  |                     |                                   |  |    |        |
|     | Yes.         | Describe            | Account Type:                     | Institution name:  |    |        |
|     |              |                     | Checking Account                  | Fifth Third Bank   | \$ | 800.00 |
|     |              |                     |                                   |  | s  | 800.00 |
| 10  | Bonds mu     | tual funde or r     | oublicly traded stocks            |  | ·  |        |
| 10. |              | -                   | =                                 | £  |    |        |
|     |              | Bona tunas, inves   | tment accounts with brokerage     | e firms, money market accounts   |    |        |
|     | No.          |                     |                                   |  |    |        |
|     | ☐Yes.        | Describe            | Institution or issuer name        | :  |    |        |
|     | _            |                     |                                   |  | •  | 0.00   |
| 10  | Non nublic   | ly traded atack     | and interests in incorner         | rated and unincornerated businesses, including an interest in              | Ψ  |        |
| 19. |              | iy iladed Stock     | and interests in incorpor         | rated and unincorporated businesses, including an interest in              |    |        |
|     | No.          |                     |                                   |  |    |        |
|     | Yes.         | Describe            | Name of Entity and Perce          | ent of Ownership:  |    |        |
|     | _            |                     | -                                 | ·  | \$ | 0.00   |
| 20  | Covernme     | nt and cornera      | to bondo and other negati         | ighle and non negotiable instruments                                       | ¥  |        |
| 20. |              | -                   | =                                 | iable and non-negotiable instruments                                       |    |        |
|     | -            |                     |                                   | checks, promissory notes, and money orders.                                |    |        |
|     | Non-negotia  | able instruments a  | are those you cannot transfer to  | o someone by signing or delivering them.                                   |    |        |
|     | No.          |                     |                                   |  |    |        |
|     | Yes.         | Describe            | Issuer name:                      |  |    |        |
|     |              | 2000                |                                   |  | \$ | 0.00   |
| ~4  | D-4:         |                     |                                   |  | Ψ  |        |
| 21. |              | or pension ac       |                                   |  |    |        |
|     | Examples:    | Interests in IRA, E | RISA, Keogh, 401(k), 403(b), t    | thrift savings accounts, or other pension or profit-sharing plans          |    |        |
|     | No.          |                     |                                   |  |    |        |
|     | Yes.         | Describe            | Type of account and Insti         | itution name:  |    |        |
|     | Ш 100.       | Booonbo             | . , , ,                           |  | ė. | 0.00   |
|     |              |                     |                                   |  | ₽  | 0.00   |
| 22. | Security de  | eposits and pre     | payments                          |  |    |        |
|     | Your share   | of all unused dep   | osits you have made so that yo    | ou may continue service or use from a company                              |    |        |
|     | Examples:    | Agreements with I   | andlords, prepaid rent, public ι  | utilities (electric, gas, water), telecommunications                       |    |        |
|     | No.          |                     |                                   |  |    |        |
|     | Yes.         | Describe            | Institution name or individ       | dual·  |    |        |
|     | 1 es.        | Describe            | montation name of marvie          | audi.  |    | 0.00   |
|     |              |                     |                                   |  | \$ | 0.00   |
| 23. | Annuities (  | A contract for      | a periodic payment of mo          | ney to you, either for life or for a number of years)                      |    |        |
|     | No.          |                     |                                   |  |    |        |
|     | Yes.         | Describe            | Issuer name and descript          | tion.  |    |        |
|     | 1 es.        | Describe            | issuer name and descript          | ion.   |    | 0.00   |
| _   |              |                     |                                   |  | \$ | 0.00   |
| 24. | Interests in | an education        | IRA, in an account in a qu        | ialified ABLE program, or under a qualified state tuition program.         |    |        |
|     | 26 U.S.C. §  | § 530(b)(1), 529A   | (b), and 529(b)(1).               |  |    |        |
|     | No.          |                     |                                   |  |    |        |
|     |              | Dogoribo            | Institution name and desc         | cription. Separately file the records of any interests.11 U.S.C. § 521(c): |    |        |
|     | Yes.         | Describe            | mondation name and desc           | onpulon. Separately life the records of any interests. 11 0.0.0. § 021(c). | _  |        |
|     |              |                     |                                   |  | \$ | 0.00   |
| 25. | Trusts, equ  | iitable or future   | e interests in property (oth      | her than anything listed in line 1), and rights or powers                  |    |        |
|     | No.          |                     |                                   |  |    |        |
|     | <b>=</b>     | December            |                                   |  |    |        |
|     | Yes.         | Describe            |                                   |  |    |        |
|     |              |                     |                                   |  | \$ | 0.00   |
| 26. | Patents, co  | pyrights, trade     | marks, trade secrets, and         | d other intellectual property  |    |        |
|     | Examples:    | Internet domain na  | ames, websites, proceeds from     | n royalties and licensing agreements                                       |    |        |
|     | No.          |                     |                                   |  |    |        |
|     | <b>=</b>     |                     |                                   |  |    |        |
|     | Yes.         | Describe            |                                   |  |    |        |
|     |              |                     |                                   |  | \$ | 0.00   |
| 27. | Licenses, f  | ranchises, and      | other general intangibles         | 5  |    |        |
|     |              |                     |                                   | e association holdings, liquor licenses, professional licenses             |    |        |
|     | No.          | <u>.</u>            |                                   | •                                    |    |        |
|     | <b>=</b>     | _                   |                                   |  |    |        |
|     | Yes.         | Describe            |                                   |  |    |        |
|     |              |                     |                                   |  | \$ | 0.00   |
|     |              |                     |                                   |  |    |        |

Case 17-36180 Barbara

Doc 1

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Desc Main

Debtor 1

| Henderson     |
|---------------|
| _Henderson    |
| <br>Dooilmont |
| Document      |
| Last Name     |

Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions 28. Tax refunds owed to you No. Describe..... Yes. 2017 expected tax refund \$5.000 5,000.00 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No. Yes. Describe..... 0.00 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else Yes. Describe..... 0.00 31. Interest in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No. Company Name & Beneficiary: Yes. Describe..... 0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No. Yes. Describe..... 0.00 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No. Yes. Describe..... 0.00 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights No. Yes. Describe..... 0.00 35. Any financial assets you did not already list No. Describe..... 0.00 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$5,800.00 Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. Yes. Current value of the

| Tark of  |  |
|--|--|
| 37. Do you own or have any legal or equitable interest in any business-related property? |  |
| No.  |  |

38. Accounts receivable or commissions you already earned

portion you own? Do not deduct secured claims or exemptions

0.00

| No.  |          |  |
|------|----------|--|
| Yes. | Describe |  |
|      |          |  |

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Desc Main

| 39. Office equipment, furnishings, and supplies  Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic of No.   | levices                            |
|--|------------------------------------|
| Yes. Describe  | \$ 0.00                            |
| 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade  No.   |                                    |
| Yes. Describe  | \$0.00                             |
| 41. Inventory No.  |                                    |
| Yes. Describe  | \$0.00                             |
| 42. Interests in partnerships or joint ventures  |                                    |
| No. Name of Entity and Percent of Ownership:  Yes. Describe  |                                    |
| Tes. Describe  | \$0.00                             |
| 43. Customer lists, mailing lists, or other compilations  No.  |                                    |
| Yes. Describe  |                                    |
| 44. Any business-related property you did not already list   | \$ <u>0.0</u> 0                    |
| No.  |                                    |
| Yes. Describe  | \$0.00                             |
| 45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached   |                                    |
| for Part 5. Write that number here   | \$ 0.00                            |
| Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.   |                                    |
|  |                                    |
| If you own or have an interest in farmland, list it in Part 1.   |                                    |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  |                                    |
| If you own or have an interest in farmland, list it in Part 1.   |                                    |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.   | \$0 <u>.0</u> 0                    |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  | \$ <u>0.0</u> 0                    |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  |                                    |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.   |                                    |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  |                                    |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  Yes. Describe   |                                    |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  | \$0.00                             |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  | \$\$<br>\$\$                       |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.   | \$0.00                             |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  50. Farm and fishing supplies, chemicals, and feed  No.   | \$\$<br>\$\$                       |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  50. Farm and fishing supplies, chemicals, and feed  No.  Yes. Describe  | \$\$<br>\$\$                       |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish No. Yes. Describe  48. Crops—either growing or harvested No. Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe  50. Farm and fishing supplies, chemicals, and feed No. Yes. Describe  51. Any farm- and commercial fishing-related property you did not already list     | \$\$<br>\$\$<br>\$\$               |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No.  Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish  No.  Yes. Describe  48. Crops—either growing or harvested  No.  Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade  No.  Yes. Describe  50. Farm and fishing supplies, chemicals, and feed  No.  Yes. Describe  | \$\$<br>\$\$<br>\$0<br>\$\$        |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish No. Yes. Describe  48. Crops—either growing or harvested No. Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe  50. Farm and fishing supplies, chemicals, and feed No. Yes. Describe  51. Any farm- and commercial fishing-related property you did not already list No. | \$\$<br>\$\$<br>\$\$               |
| If you own or have an interest in farmland, list it in Part 1.  46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?  No. Yes. Describe  47. Farm animals  Examples: Livestock, poultry, farm-raised fish No. Yes. Describe  48. Crops—either growing or harvested No. Yes. Describe  49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade No. Yes. Describe  50. Farm and fishing supplies, chemicals, and feed No. Yes. Describe  51. Any farm- and commercial fishing-related property you did not already list No. | \$\$<br>\$\$<br>\$\$<br>\$\$<br>\$ |

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63. Total of all property on Schedule A/B. Add line 55 + line 62

Doc 1

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Page 15 of 58 winder (if known)

Page 15 of 58 winder (if known)

Desc Main

Describe All Property You Own or Have an Interest in That You Did Not List Above Part 7: 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. Describe..... Yes. 0.00 \$0.00 54. Add the dollar value of all of your entries from Part 7. Write that number here ...... --> List the Totals of Each Part of this Form Part 8: \$ 0.00 55. Part 1: Total real estate, line 2 \$ 13,000.00 56. Part 2: Total vehicles, line 5 \$ 2,050.00 57. Part 3: Total personal and household items, line 15 58. Part 4: Total financial assets, line 36 \$ 5,800.00 59. Part 5: Total business-related property, line 45 \$ 0.00 \$ 0.00 60. Part 6: Total farm- and fishing-related property, line 52 61. Part 7: Total other property not listed, line 54 \$ 0.00 \$ 20,850.00 \$ 20,850.00 62. Total personal property. Add lines 56 through 61. .....

\$20,850.00

Official Form 106A/B

Record # 753156

Schedule A/B: Property

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| Fill in this in           | formation to identif     |                                 | la cumont |
|---------------------------|--------------------------|---------------------------------|-----------|
| Debtor 1                  | Barbara                  | Lacretia                        | Henderson |
|                           | First Name               | Middle Name                     | Last Name |
| Debtor 2                  |                          |                                 |           |
| (Spouse, if filing)       | First Name               | Middle Name                     | Last Name |
| United States             | Bankruptcy Court for the | ne: <u>NORTHERN</u> District of | ILLINOIS  |
|                           | . ,                      |                                 | (State)   |
| Case Number<br>(If known) | r                        |                                 | _         |

# Official Form 106C

### Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part:1: Identify the Property You Claim as Exempt |   |                                      |   |                                    |  |  |  |  |  |
|---|---|--------------------------------------|---|------------------------------------|--|--|--|--|--|
| 1. Which set of ex                                | . Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you. |                                      |   |                                    |  |  |  |  |  |
| You are clair                                     | You are claiming state and federal nonbankruptcy exemptions . 11 U.S.C. § 522(b)(3)                 |                                      |   |                                    |  |  |  |  |  |
| You are clair                                     | You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)  |                                      |   |                                    |  |  |  |  |  |
|   |   |                                      |   |                                    |  |  |  |  |  |
| 2. For any propert                                | y you list on <i>Schedule A/B</i> that yo   | ou claim as exempt, fill in          | the information below.  |                                    |  |  |  |  |  |
|   | on of the property and line on hat lists this property  | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |  |  |  |  |  |
|   |   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |  |  |  |  |  |
| Brief description:                                | 2017 Chevrolet Sonic with over 11,000 miles   | \$13,000                             | \$ _ 2,400  | 735 ILCS 5/12-1001(c)              |  |  |  |  |  |
| Line from Schedule A/B:                           | 03  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
| Brief description:                                | Furniture, table & chairs, bedroom set  | \$ <u>1,000</u>                      | \$ _ 1,000  | 735 ILCS 5/12-1001(b)              |  |  |  |  |  |
| Line from Schedule A/B:                           | 06  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
| Brief   | Flat screen TV, DVD player, cell  | ¢ 650                                | <b>6</b> \$ 650   | 735 ILCS 5/12-1001(b)              |  |  |  |  |  |
| description:                                      | phone   | \$_650                               | \$650   |                                    |  |  |  |  |  |
| Line from Schedule A/B:                           | <u>07</u>   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
| Brief<br>description:                             | Everyday clothes  | \$ <u>300</u>                        | \$ <sub>_</sub> 300   | 735 ILCS 5/12-1001(b)              |  |  |  |  |  |
| Line from Schedule A/B:                           | <u>11</u>   |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |  |  |  |  |  |
|   |   |                                      |   |                                    |  |  |  |  |  |
| Official Form 106C                                | Record # 753156   | Schedule C: T                        | he Property You Claim as Exempt                                 | Page 1 of 2                        |  |  |  |  |  |

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Debtor 1 Barbara

Lacretia

Document

Page 17 of 58 Number (if known)

First Name Middle Name Last Name

|    | Brief description of the property and line on Schedule A/B that lists this property |   | Current value of the portion you own | Amount of the exemption you claim                               | Specific laws that allow exemption |
|----|---|---|--------------------------------------|---|------------------------------------|
|    |   |   | Copy the value from<br>Schedule A/B  | Check only one box for each exemption                           |                                    |
|    | Brief description:  | Everyday jewelry, costume jewelry             | \$100                                | \$100   | 735 ILCS 5/12-1001(a),(e)          |
|    | Line from Schedule A/B:   | 12  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Brief description:  | Checking Account, Fifth Third<br>Bank, 800.00 | \$_800                               | \$ <u>800</u>   | 735 ILCS 5/12-1001(b)              |
|    | Line from Schedule A/B:   | <u>17</u>                                     |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
|    | Brief description:  | 2017 expected tax refund                      | \$_5,000                             | \$_ 5,000   | 735 ILCS 5/12-1001(g)(1)(2)(3)     |
|    | Line from Schedule A/B:   | 28  |                                      | 100% of fair market value, up to any applicable statutory limit |                                    |
| 3. | Are you claimin   | g a homestead exemption of more               | e than \$155,675?                    |   |                                    |
|    | (Subject to adjus   | stment on 4/01/16 and every 3 year            |                                      | on or after the date of adjustment .)                           |                                    |
|    | No.   |   |                                      |   |                                    |
| ı  |   | acquire the property covered by the           | ne exemption within 1,215 o          | days before you filed this case?                                |                                    |
|    | □ No<br>□ Yes.  |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
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|    |   |   |                                      |   |                                    |
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|    |   |   |                                      |   |                                    |
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|    |   |   |                                      |   |                                    |
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|    |   |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
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|    |   |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
|    |   |   |                                      |   |                                    |
| _  | ficial Form 1060  | 753156  | Cabadula C. T                        | ha Dranarty Vay Claim as Evament                                | Page 2 of 2                        |

|                                  | information to identify   |   | oc 1   | Entered 12/05/1<br>8 of 58     | 7 17:07:18   | Desc Main  |                                   |
|----------------------------------|---|---|--|--------------------------------|--|--|-----------------------------------|
| Debtor 1                         | Barbara   | Lacretia  | a Henderson  |                                |  |  |                                   |
|                                  | First Name  | Middle Name                                       | Last Name  |                                |  |  |                                   |
| Debtor 2                         |   |   |  |                                |  |  |                                   |
| (Spouse, if filing)              | j) First Name   | Middle Name                                       | Last Name  |                                |  |  |                                   |
| United State                     | es Bankruptcy Court for th  | e : <u>NORTHERN</u>                               | _ District of _ <u>ILLINOIS</u> _  |                                |  |  |                                   |
| Case Numb                        | ner   |   | (State)  |                                |  | Check if this  | s is an                           |
| (If known)                       |   |   |  |                                |  | amended fi   | ling                              |
| Official F                       | Form 106D   |   |  |                                |  |  |                                   |
| chedul                           | e D: Creditors  | Who Have  | e Claims Secured by P  | Property                       |  |  | 12/15                             |
| 1. <b>Do any cr</b>              | Fill in all of the informat   | ecured by your pomit this form to the tion below. | ` ,  | ou have nothing else to report | on this form.  |  |                                   |
| Part 1:                          | List All Secured Claim  | ıs  |  |                                |  |  |                                   |
| for each                         | claim. If more than on  | e creditor has a p                                | an one secured claim, list the creditor<br>articular claim, list the other creditors<br>al order according to the creditors na   | in Part 2.                     | Column A  Amount of claim  Do not deduct the value of collateral | Column A  Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 GM Fi                        | inancial  |   | Describe the property that secure  | es the claim:                  | \$ 20,108.00   | <b>\$</b> 13,000.00                                    | \$ <u>7,108.00</u>                |
|                                  | r's Name<br>Ox 181145<br>er Street  |   | 2017 Chevrolet Sonic with over   | 11,000 miles                   |  |  |                                   |
|                                  |   |   | As of the date you file, the claim i   | is: Check all that apply.      | _  |  |                                   |
|                                  |   | T)/ 70000   | Contingent   |                                |  |  |                                   |
| Arlingt                          |   | TX 76096<br>State Zip Code                        | Unliquidated   |                                |  |  |                                   |
| City                             |   | olate Zip code                                    | Disputed   |                                |  |  |                                   |
| City                             |   |   | Nature of Lien. Check all that apply   | ∮.                             |  |  |                                   |
| Who owe                          | res the debt? Check one.  |   | _  |                                |  |  |                                   |
| Who owe                          | or 1 only   |   | An agreement you made (such as   | s mortgage or secured          |  |  |                                   |
| Who owe                          | or 1 only<br>or 2 only  |   | An agreement you made (such as car loan)   |                                |  |  |                                   |
| Who owe                          | or 1 only<br>or 2 only<br>or 1 and Debtor 2 only  | another   | An agreement you made (such as car loan)  Statutory lien (such as tax lien, m  |                                |  |  |                                   |
| Who owe                          | or 1 only<br>or 2 only  | another   | An agreement you made (such as car loan)  Statutory lien (such as tax lien, m  Judgment lien from a lawsuit  | nechanic's lien)               |  |  |                                   |
| Who owe Debto Debto At lea       | or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and ck if this claim relates to             |   | An agreement you made (such as car loan)  Statutory lien (such as tax lien, m  | nechanic's lien)               |  |  |                                   |
| Who owe Debto Debto Debto At lea | or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and ck if this claim relates to munity debt |   | An agreement you made (such as car loan)  Statutory lien (such as tax lien, m  Judgment lien from a lawsuit  | nechanic's lien)               |  |  |                                   |
| Who owe Debto Debto Debto At lea | or 1 only or 2 only or 1 and Debtor 2 only ast one of the debtors and ck if this claim relates to munity debt | o a<br>017-06-03                                  | An agreement you made (such as car loan)  Statutory lien (such as tax lien, m Judgment lien from a lawsuit  Other (including a right to offset)  Last 4 digits of account number | nechanic's lien)               |  |  |                                   |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$\_20,108.00

| Fill in this i  | Caso 17 26190  |   | Eilad 12/05/17   | Entered 12/05/17 17:07:18   | 8 Desc Main                          |              |
|---|--|---|--|---|--------------------------------------|--------------|
|   | information to identify your co  | ase.  |  | 9 of 58   |                                      |              |
| Debtor 1  | Barbara  | Lacretia  | Henderson  |   |                                      |              |
|   | First Name   | Middle Name   | Last Name  |   |                                      |              |
| Debtor 2  | Final Name   | Middle Masses   | Landhama   |   |                                      |              |
| (Spouse, if filing)   | First Name   | Middle Name   | Last Name  |   |                                      |              |
| United State  | es Bankruptcy Court for the : <u>NO</u>  | RTHERN_ District  | of <u>ILLINOIS</u><br>(State)  |   | _                                    |              |
| Case Numb   | er   |   | (State)  |   | Check if                             | f this is an |
| (If known)  |  |   |  |   | amende                               | d filing     |
| Official F  | Form 106E/F  |   |  |   |                                      |              |
| Schedule  | e E/F: Creditors Wi  | ho Have U   | nsecured Claims  |   |                                      | 12/15        |
| ist the other<br>\(\begin{align*} B: Property \\ reditors with \\ eeded, copy | party to any executory contra<br>(Official Form 106A/B) and or<br>partially secured claims that          | acts or unexpired<br>in Schedule G: Ex<br>are listed in Scho<br>number the entrie<br>ne and case numb | leases that could result in a<br>recutory Contracts and Une<br>redule D: Creditors Who Have<br>s in the boxes on the left. A | s and Part 2 for creditors with NONPRIORIT<br>a claim. Also list executory contracts on Sc<br>expired Leases (Official Form 106G). Do not<br>we Claims Secured by Property. If more spa<br>Attach the Continuation Page to this page. C | hedule<br>include any<br>ce is       |              |
|   | raditara hayo priority upoccur   | ad alaima againa  | t vou?   |   |                                      |              |
| _ `   | reditors have priority unsecur   | eu ciaims agains  | t you?   |   |                                      |              |
| =   | So to Part 2.  |   |  |   |                                      |              |
| Yes.  | your priority unsecured clain  | ne If a creditor ha   | s more than one priority une   | secured claim, list the creditor separately for e   | ach claim. For                       |              |
| each clair<br>nonpriorit<br>unsecure  | m listed, identify what type of cl<br>y amounts. As much as possib<br>d claims, fill out the Continuatio | aim it is. If a claim<br>le, list the claims i<br>on Page of Part 1.                                  | n has both priority and nonpri<br>n alphabetical order accordir<br>If more than one creditor ho                              | iority amounts, list that claim here and show being to the creditor's name. If you have more the lolds a particular claim, list the other creditors in  | ooth priority and<br>an two priority |              |
| (For an ex  | xplanation of each type of clain   | n, see the instruct   | ions for this form in the instru   | Total cla   | im Priority                          | Nonpriority  |
|   |  |   |  |   | amount                               | amount       |
| Part 2:   | List All of Your NONPRIORITY   | Unsecured Claims  | •  |   |                                      |              |
| 3. Do any cr  | editors have nonpriority unse  | ecured claims aga   | ainst you?   |   |                                      |              |
| ☐ No. Y   | ou have nothing to report in th  | is part. Submit th  | is form to the court with your   | other schedules.  |                                      |              |
| Yes.  |  |   |  |   |                                      |              |
| nonpriority<br>included i   | y unsecured claim, list the cred<br>n Part 1. If more than one cred                                      | litor separately for itor holds a partic  | each claim. For each claim   | or who holds each claim. If a creditor has mo<br>listed, identify what type of claim it is. Do not<br>itors in Part 3.If you have more than three nor   | list claims already                  |              |
| claims fill   | out the Continuation Page of F   | Part 2.   |  |   |                                      | Total claim  |
| 4.1 AIU -   | Online   | Las   | t 4 digits of account number   | 5016  |                                      | \$_543.00    |
| Creditor'   | 's Name<br>W Cortland St Ste 2   | Who   | en was the debt incurred?  | 2015-2015   |                                      |              |
| Number  | Street   |   |  |   |                                      |              |
|   |  | As  | of the date you file, the claim  | is: Check all that apply.   |                                      |              |
| Chicag  | go IL 60   | 622   | Contingent   |   |                                      |              |
| City  | State Zip  | Code  | Unliquidated<br>Disputed   |   |                                      |              |
|   | es the debt? Check one.  | Ш   | Disputed   |   |                                      |              |
| =   | or 1 only<br>or 2 only   | Tyn   | e of NONPRIORITY unsecure  | ed claim:   |                                      |              |
|   | or 1 and Debtor 2 only   | - i   | Student loans  |   |                                      |              |
| =   | st one of the debtors and another  |   | Obligations arising out of a separ   | ration agreement or divorce   |                                      |              |
| =   | k if this claim relates to a   | _   | that you did not report as priority  | claims  |                                      |              |
|   | nunity debt  |   | Debts to pension or profit-sharing   | g plans, and other similar debts  |                                      |              |
| Is the cla  | aim subject to offest?   | _   | Other, Specify Collecting for  |   |                                      |              |
| INO   |  |   | Other. Specify Collecting for  |   |                                      |              |

| Debtor 1    | Barbara<br>First Name | Case 17-36180  Lacretia  Middle Name  NONPRIORITY Unsecured Cla | DOC 1        | Last Name                    | Entered 12/05/17 17:07:18<br>Page 20 of 58<br>Case Number (if known) |    |
|-------------|-----------------------|---|--------------|------------------------------|--|----|
| After listi | ng any er             | ntries on this page, number t                                   | hem beginnir | ng with 4.4, followed by 4.5 | 5, and so forth.   | 1  |
| 4.2         | T&T                   | ne .  | _ Las        | t 4 digits of account numbe  | r  | \$ |

| After l | isting any entries on this page, number them be | ginning with 4.4, followed by 4.5, and so forth.                  | Total Claim      |
|---------|---|---|------------------|
| 4.2     | AT&T  | Last 4 digits of account number                                   | \$ <u>235.00</u> |
|         | Creditor's Name                                 | 2045  |                  |
|         | PO Box 8212                                     | When was the debt incurred? 2015                                  |                  |
|         | Number Street                                   |   |                  |
|         |   | As of the date you file, the claim is: Check all that apply.      |                  |
|         |   | Contingent  |                  |
|         | Aurora IL 60572-8212                            | Unliquidated  |                  |
|         | City State Zip Code                             |   |                  |
| '       | Who owes the debt? Check one.                   | Disputed  |                  |
|         | Debtor 1 only                                   |   |                  |
|         | Debtor 2 only                                   | Type of NONPRIORITY unsecured claim:                              |                  |
|         | Debtor 1 and Debtor 2 only                      | Student loans   |                  |
| l j     | At least one of the debtors and another         | Obligations arising out of a separation agreement or divorce      |                  |
| i       | Check if this claim relates to a                | that you did not report as priority claims                        |                  |
| '       | community debt                                  | Debts to pension or profit-sharing plans, and other similar debts |                  |
| 1       | s the claim subject to offest?                  |   |                  |
|         | No  | Other. Specify Utility Bills/Cellular Service                     |                  |
|         | Yes   |   |                  |
| 4.3     | COMENITY BANK/Ashstwrt                          | Last 4 digits of account number NULL                              | <u>\$ 161.40</u> |
|         | Creditor's Name                                 | 0047 0047   |                  |
|         | Po Box 182789                                   | When was the debt incurred? 2017-2017                             |                  |
|         | Number Street                                   |   |                  |
|         |   | As of the date you file, the claim is: Check all that apply.      |                  |
|         |   | Contingent  |                  |
|         | Columbus OH 43218                               | Unliquidated  |                  |
|         | City State Zip Code                             |   |                  |
| '       | Who owes the debt? Check one.                   | Disputed  |                  |
|         | Debtor 1 only                                   |   |                  |
|         | Debtor 2 only                                   | Type of NONPRIORITY unsecured claim:                              |                  |
|         | Debtor 1 and Debtor 2 only                      | Student loans   |                  |
| j       | At least one of the debtors and another         | Obligations arising out of a separation agreement or divorce      |                  |
| i       | Check if this claim relates to a                | that you did not report as priority claims                        |                  |
| Ι'      | community debt                                  | Debts to pension or profit-sharing plans, and other similar debts |                  |
| 1       | s the claim subject to offest?                  |   |                  |
|         | No  | Other. Specify Credit Card or Credit Use                          |                  |
|         | Yes   |   |                  |
| 4.4     | COMENITY BANK/Carsons                           | Last 4 digits of account number NULL                              | \$ <u>240.57</u> |
|         | Creditor's Name                                 | 0047 0047   |                  |
|         | 3100 Easton Square Pl                           | When was the debt incurred? 2017-2017                             |                  |
|         | Number Street                                   |   |                  |
|         |   | As of the date you file, the claim is: Check all that apply.      |                  |
|         |   | Contingent  |                  |
|         | Columbus OH 43219                               |   |                  |
|         | City State Zip Code                             | Unliquidated  |                  |
| '       | Who owes the debt? Check one.                   | Disputed  |                  |
|         | Debtor 1 only                                   |   |                  |
|         | Debtor 2 only                                   | Type of NONPRIORITY unsecured claim:                              |                  |
|         | Debtor 1 and Debtor 2 only                      | Student loans   |                  |
| Î       | At least one of the debtors and another         | Obligations arising out of a separation agreement or divorce      |                  |
| l i     | Check if this claim relates to a                | that you did not report as priority claims                        |                  |
| '       | community debt                                  | Debts to pension or profit-sharing plans, and other similar debts |                  |
| !       | s the claim subject to offest?                  |   |                  |
|         | No  | Other. Specify Credit Card or Credit Use                          |                  |
|         | Yes   |   |                  |

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Your NONPRIORITY Unsecured Claims - Continuation Page

| After I | isting any entries on this page, number them be   | eginning with 4.4, followed by 4.5, and so forth.                 | Total Claim        |
|---------|---|---|--------------------|
| 4.5     | Comenitycap/Chldplce                              | Last 4 digits of account number NULL                              | \$ <u>204.92</u>   |
|         | Creditor's Name                                   | 0047 0047   |                    |
|         | Po Box 182120                                     | When was the debt incurred? 2017-2017                             |                    |
|         | Number Street                                     |   |                    |
|         |   | As of the date you file, the claim is: Check all that apply.      |                    |
|         |   | Contingent  |                    |
|         | Columbus OH 43218                                 | Unliquidated  |                    |
| ١,      | City State Zip Code Who owes the debt? Check one. | Disputed  |                    |
|         | Debtor 1 only                                     |   |                    |
|         | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:                              |                    |
|         | Debtor 1 and Debtor 2 only                        | Student loans   |                    |
|         | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce      |                    |
|         | Check if this claim relates to a                  | that you did not report as priority claims                        |                    |
| '       | community debt                                    | Debts to pension or profit-sharing plans, and other similar debts |                    |
|         | ls the claim subject to offest?                   |   |                    |
|         | No  | Other. Specify Credit Card or Credit Use                          |                    |
|         | Yes   |   |                    |
| 4.6     | Convergent Outsourcing Inc.                       | Last 4 digits of account number <u>1615</u>                       | <u>\$ 907.56</u>   |
|         | Creditor's Name                                   | WII   |                    |
|         | PO Box 9004                                       | When was the debt incurred?                                       |                    |
|         | Number Street                                     |   |                    |
|         |   | As of the date you file, the claim is: Check all that apply.      |                    |
|         | Denten WA 00057                                   | Contingent  |                    |
|         | Renton WA 98057  City State Zip Code              | Unliquidated  |                    |
| ١,      | Who owes the debt? Check one.                     | Disputed  |                    |
|         | Debtor 1 only                                     |   |                    |
|         | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:                              |                    |
|         | Debtor 1 and Debtor 2 only                        | Student loans   |                    |
|         | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce      |                    |
|         | Check if this claim relates to a                  | that you did not report as priority claims                        |                    |
| '       | community debt                                    | Debts to pension or profit-sharing plans, and other similar debts |                    |
|         | ls the claim subject to offest?                   |   |                    |
|         | No  | Other. Specify Credit Card or Credit Use                          |                    |
|         | Yes   | 0474  | * 4.054.00         |
| 4.7     | Convergent Outsourcing Inc.                       | Last 4 digits of account number 3151                              | \$ <u>1,051.98</u> |
|         | Creditor's Name PO Box 9004                       | When was the debt incurred?                                       |                    |
|         | Number Street                                     |   |                    |
|         | Number Street                                     |   |                    |
|         |   | As of the date you file, the claim is: Check all that apply.      |                    |
|         | Renton WA 98057                                   | Contingent  |                    |
|         | City State Zip Code                               | Unliquidated  |                    |
| ١ ،     | Who owes the debt? Check one.                     | Disputed  |                    |
|         | Debtor 1 only                                     |   |                    |
|         | Debtor 2 only                                     | Type of NONPRIORITY unsecured claim:                              |                    |
|         | Debtor 1 and Debtor 2 only                        | Student loans   |                    |
|         | At least one of the debtors and another           | Obligations arising out of a separation agreement or divorce      |                    |
|         | Check if this claim relates to a                  | that you did not report as priority claims                        |                    |
| '       | community debt                                    | Debts to pension or profit-sharing plans, and other similar debts |                    |
|         | Is the claim subject to offest?                   |   |                    |
|         | No  | Other. Specify Credit Card or Credit Use                          |                    |
|         | Yes   |   |                    |

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Your NONPRIORITY Unsecured Claims - Continuation Page

| After li | sting any entries on this page, number them be     | nd so forth.  | Total Claim                    |                    |  |  |
|----------|--|---|--------------------------------|--------------------|--|--|
| 4.8      | Credit ONE BANK NA                                 | Last 4 digits of account number _                                 | NULL                           | \$ <u>262.00</u>   |  |  |
|          | Creditor's Name                                    | When was the debt incomed?  | 2017-2017                      |                    |  |  |
|          | Po Box 98875                                       | When was the debt incurred?                                       | <u> </u>                       |                    |  |  |
|          | Number Street                                      |   |                                |                    |  |  |
|          |  | As of the date you file, the claim is                             | : Check all that apply.        |                    |  |  |
|          | L = 2 \/ 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2 = 2     | Contingent  |                                |                    |  |  |
|          | Las Vegas NV 89193 City State Zip Code             | Unliquidated  |                                |                    |  |  |
| v        | City State Zip Code  Vho owes the debt? Check one. | Disputed  |                                |                    |  |  |
|          | Debtor 1 only                                      |   |                                |                    |  |  |
| Ī        | Debtor 2 only                                      | Type of NONPRIORITY unsecured                                     | claim:                         |                    |  |  |
| l i      | Debtor 1 and Debtor 2 only                         | Student loans   |                                |                    |  |  |
| İ        | At least one of the debtors and another            | Obligations arising out of a separat                              | ion agreement or divorce       |                    |  |  |
| l i      | Check if this claim relates to a                   | that you did not report as priority cl                            | aims                           |                    |  |  |
| '        | community debt                                     | Debts to pension or profit-sharing p                              | olans, and other similar debts |                    |  |  |
| <u> </u> | s the claim subject to offest?                     |   |                                |                    |  |  |
|          | No   | Other. Specify Credit Card or                                     | Credit Use                     |                    |  |  |
|          | Yes  |   |                                |                    |  |  |
| 4.9      | CTU - Online                                       | Last 4 digits of account number _                                 | 9068                           | \$ <u>5,850.00</u> |  |  |
|          | Creditor's Name                                    | William was a through the back to account do                      | 2014-2014                      |                    |  |  |
|          | 1700 W Cortland St Ste 2                           | When was the debt incurred?                                       | 2011 2011                      |                    |  |  |
|          | Number Street                                      |   |                                |                    |  |  |
|          |  | As of the date you file, the claim is                             | : Check all that apply.        |                    |  |  |
|          | Chicago II COCOO                                   | Contingent  |                                |                    |  |  |
|          | Chicago IL 60622                                   | Unliquidated  |                                |                    |  |  |
| v        | City State Zip Code  Vho owes the debt? Check one. | Disputed  |                                |                    |  |  |
|          | Debtor 1 only                                      |   |                                |                    |  |  |
| l i      | Debtor 2 only                                      | Type of NONPRIORITY unsecured                                     | claim:                         |                    |  |  |
| l i      | Debtor 1 and Debtor 2 only                         | Student loans   |                                |                    |  |  |
| l i      | At least one of the debtors and another            | Obligations arising out of a separat                              | ion agreement or divorce       |                    |  |  |
| l i      | Check if this claim relates to a                   | that you did not report as priority cla                           |                                |                    |  |  |
| "        | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                                |                    |  |  |
| <u> </u> | s the claim subject to offest?                     |   |                                |                    |  |  |
|          | No   | Other. Specify Collecting for C                                   | Creditor                       |                    |  |  |
|          | Yes  |   |                                |                    |  |  |
| 4.10     | DEPT OF EDUCATION/NELN                             | Last 4 digits of account number _                                 | <u>4624</u>                    | \$ <u>533.00</u>   |  |  |
|          | Creditor's Name<br>121 S 13Th St                   | When was the debt incomed?  | 2010-2015                      |                    |  |  |
|          |  | When was the debt incurred?                                       |                                |                    |  |  |
|          | Number Street                                      |   |                                |                    |  |  |
|          |  | As of the date you file, the claim is                             | : Check all that apply.        |                    |  |  |
|          | Lincoln NE 68508                                   | Contingent  |                                |                    |  |  |
|          | City State Zip Code                                | Unliquidated  |                                |                    |  |  |
| \ v      | Vho owes the debt? Check one.                      | Disputed  |                                |                    |  |  |
|          | Debtor 1 only                                      |   |                                |                    |  |  |
| l i      | Debtor 2 only                                      | Type of NONPRIORITY unsecured                                     | claim:                         |                    |  |  |
| i l      | Debtor 1 and Debtor 2 only                         | Student loans   |                                |                    |  |  |
| į į      | At least one of the debtors and another            | Obligations arising out of a separat                              | ion agreement or divorce       |                    |  |  |
| i        | Check if this claim relates to a                   | that you did not report as priority cla                           |                                |                    |  |  |
| '        | community debt                                     | Debts to pension or profit-sharing p                              |                                |                    |  |  |
| <u> </u> | s the claim subject to offest?                     |   |                                |                    |  |  |
|          | No   | Other. Specify  |                                |                    |  |  |
|          | Yes  |   |                                |                    |  |  |

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Your NONPRIORITY Unsecured Claims - Continuation Page

| After li | isting any entries on this page, number them be    | ginning with 4.4, followed by 4.5, and so forth.                  | Total Claim        |
|----------|--|---|--------------------|
| 4.11     | DEPT OF EDUCATION/NELN                             | Last 4 digits of account number1622                               | \$ <u>2,636.00</u> |
|          | Creditor's Name                                    | 2045-2047   |                    |
|          | 121 S 13Th St                                      | When was the debt incurred? 2015-2017                             |                    |
|          | Number Street                                      |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |
|          | NE 00500   | Contingent  |                    |
|          | Lincoln NE 68508                                   | Unliquidated  |                    |
| ١ ,      | City State Zip Code  Who owes the debt? Check one. | Disputed  |                    |
| l 1      | Debtor 1 only                                      | _   |                    |
| l i      | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |
| İ        | Debtor 1 and Debtor 2 only                         | Student loans   |                    |
| İ        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |
| l i      | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |
| ۱ '      | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                    |
| <u> </u> | s the claim subject to offest?                     | <del>_</del>  |                    |
|          | No   | Other. Specify  |                    |
|          | Yes  |   | 0.054.00           |
| 4.12     | DEPT OF EDUCATION/NELN                             | Last 4 digits of account number8424                               | \$ <u>2,951.00</u> |
|          | Creditor's Name<br>121 S 13Th St                   | When was the debt incurred? 2009-2015                             |                    |
|          |  | When was the debt incurred?                                       |                    |
|          | Number Street                                      |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |
|          | Lincoln NE 68508                                   | Contingent  |                    |
|          | City State Zip Code                                | Unliquidated  |                    |
| ١ ٧      | Who owes the debt? Check one.                      | Disputed  |                    |
|          | Debtor 1 only                                      |   |                    |
| [        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |
| [        | Debtor 1 and Debtor 2 only                         | Student loans   |                    |
| [        | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |
|          | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |
|          | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                    |
| l ¦      | s the claim subject to offest?                     |   |                    |
|          | No   | Other. Specify  |                    |
| 4.40     | Yes DEPT OF EDUCATION/NELN                         | Last 4 digits of account number 1722                              | <b>\$</b> 4,838.00 |
| 4.13     | Creditor's Name                                    | Last 4 digits of account number                                   | <u> </u>           |
|          | 121 S 13Th St                                      | When was the debt incurred? 2015-2017                             |                    |
|          | Number Street                                      |   |                    |
|          |  | As of the date you file, the claim is: Check all that apply.      |                    |
|          |  | Contingent  |                    |
|          | Lincoln NE 68508                                   | Unliquidated  |                    |
| ١.       | City State Zip Code                                | Disputed  |                    |
| '        | Who owes the debt? Check one.                      | Disputed  |                    |
|          | Debtor 1 only                                      |   |                    |
|          | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                    |
| ļ        | Debtor 1 and Debtor 2 only                         | Student loans   |                    |
| إا       | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                    |
| L        | Check if this claim relates to a                   | that you did not report as priority claims                        |                    |
|          | community debt s the claim subject to offest?      | Debts to pension or profit-sharing plans, and other similar debts |                    |
| l i      | No   | Other Specify   |                    |
|          | Yes  | Other. Specify  |                    |

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First Name Middle Name Last Name

Part 2+ Your NONPRIORITY Unsecured Claims - Continuation Page

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4.14 DEPT OF EDUCATION/NELN Last 4 digits of account number 8524

| After lis | sting any entries on this page, number them be     | ginning with 4.4, followed by 4.5, an   | d so forth.                  | Total Claim        |
|-----------|--|---|------------------------------|--------------------|
| 4.14      | DEPT OF EDUCATION/NELN                             | Last 4 digits of account number         | 8524                         | \$ <u>6,341.00</u> |
|           | Creditor's Name                                    |   | 2009-2015                    |                    |
|           | 121 S 13Th St                                      | When was the debt incurred?             |                              |                    |
|           | Number Street                                      |   |                              |                    |
|           |  | As of the date you file, the claim is:  | Check all that apply.        |                    |
|           |  | Contingent                              |                              |                    |
|           | Lincoln NE 68508                                   | Unliquidated                            |                              |                    |
| , w       | City State Zip Code //no owes the debt? Check one. | Disputed                                |                              |                    |
|           | Debtor 1 only                                      |   |                              |                    |
| ΙГ        | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | claim:                       |                    |
| ΙĒ        | Debtor 1 and Debtor 2 only                         | Student loans                           |                              |                    |
| lī        | At least one of the debtors and another            | Obligations arising out of a separation | on agreement or divorce      |                    |
| 1 7       | Check if this claim relates to a                   | that you did not report as priority cla | -                            |                    |
| -         | community debt                                     | Debts to pension or profit-sharing pl   |                              |                    |
| Is        | the claim subject to offest?                       |   |                              |                    |
|           | No   | Other. Specify                          |                              |                    |
|           | Yes  |   |                              |                    |
| 4.15      | First Premier BANK                                 | Last 4 digits of account number         | NULL                         | <b>\$</b> 397.37   |
|           | Creditor's Name                                    |   | 2010 2017                    |                    |
|           | 601 S Minnesota Ave                                | When was the debt incurred?             | 2016-2017                    |                    |
|           | Number Street                                      |   |                              |                    |
|           |  | As of the date you file, the claim is:  | Check all that apply.        |                    |
|           |  | Contingent                              |                              |                    |
|           | Sioux Falls SD 57104                               | Unliquidated                            |                              |                    |
|           | City State Zip Code                                | Disputed                                |                              |                    |
| <u> </u>  | /ho owes the debt? Check one.                      | Disputed                                |                              |                    |
|           | Debtor 1 only                                      |   |                              |                    |
| <u> </u>  | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | laim:                        |                    |
| L         | Debtor 1 and Debtor 2 only                         | Student loans                           |                              |                    |
| [         | At least one of the debtors and another            | Obligations arising out of a separation | on agreement or divorce      |                    |
|           | Check if this claim relates to a                   | that you did not report as priority cla | ims                          |                    |
|           | community debt                                     | Debts to pension or profit-sharing pl   | ans, and other similar debts |                    |
| Is        | the claim subject to offest?                       | _                                       |                              |                    |
|           | No   | Other. Specify Credit Card or C         | Credit Use                   |                    |
| $\vdash$  | _Yes   |   |                              | <b>^</b> 0.00      |
| 4.16      | Heritage Acceptance                                | Last 4 digits of account number         |                              | \$ <u>0.00</u>     |
|           | Creditor's Name 120 West Lexington Avenue          | When was the debt incurred?             |                              |                    |
|           |  | when was the dept incurred:             | <del></del>                  |                    |
|           | Number Street                                      |   |                              |                    |
|           | - <u></u> -  | As of the date you file, the claim is:  | Check all that apply.        |                    |
|           | Fills and IN 40540                                 | Contingent                              |                              |                    |
|           | Elkhart IN 46516                                   | Unliquidated                            |                              |                    |
| , v       | City State Zip Code //ho owes the debt? Check one. | Disputed                                |                              |                    |
|           | Debtor 1 only                                      |   |                              |                    |
|           | Debtor 2 only                                      | Type of NONPRIORITY unsecured of        | claim:                       |                    |
| Ē         | Debtor 1 and Debtor 2 only                         | Student loans                           |                              |                    |
|           | At least one of the debtors and another            | Obligations arising out of a separation | on agreement or divorce      |                    |
|           | Check if this claim relates to a                   | that you did not report as priority cla | •                            |                    |
|           | community debt                                     | Debts to pension or profit-sharing pl   |                              |                    |
| Is        | the claim subject to offest?                       |   |                              |                    |
|           | No   | Other. Specify                          |                              |                    |
|           | Yes  |   |                              |                    |

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| Par     | Your NONPRIORITY Unsecured Claims - 0           | Continuation Page   |                    |
|---------|---|---|--------------------|
| After I | isting any entries on this page, number them b  | peginning with 4.4, followed by 4.5, and so forth.  | Total Claim        |
| 4.17    | Portfolio Recovery Associates                   | Last 4 digits of account number   | <b>\$</b> 1,355.45 |
|         | Creditor's Name                                 | When use the debt incomed?  |                    |
|         | PO Box 12914  Number Street                     | When was the debt incurred?   |                    |
|         | Number Sueet                                    |   |                    |
|         |   | As of the date you file, the claim is: Check all that apply.  |                    |
|         | Norfolk VA 23541                                | Contingent  |                    |
|         | City State Zip Code                             | Unliquidated  |                    |
| '       | Who owes the debt? Check one.                   | Disputed  |                    |
|         | Debtor 1 only                                   |   |                    |
|         | Debtor 2 only                                   | Type of NONPRIORITY unsecured claim: □  |                    |
|         | Debtor 1 and Debtor 2 only                      | ☐ Student loans   |                    |
|         | At least one of the debtors and another         | Obligations arising out of a separation agreement or divorce  |                    |
|         | Check if this claim relates to a community debt | that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts |                    |
|         | s the claim subject to offest?                  | Debts to pension of profit-straining plans, and other similar debts   |                    |
|         | No  | Other. Specify Debt Owed  |                    |
|         | Yes   |   |                    |
| 4.18    | Sprint  | Last 4 digits of account number 1401  | \$ <u>1,056.00</u> |
|         | Creditor's Name                                 | When was the debt incurred? 2014-2014   |                    |
|         | 8014 Bayberry Rd                                | When was the debt incurred?   |                    |
|         | Number Street                                   |   |                    |
|         |   | As of the date you file, the claim is: Check all that apply.  |                    |
|         | Jacksonville FL 32256                           | Contingent  |                    |
|         | City State Zip Code                             | Unliquidated  |                    |
| '       | Who owes the debt? Check one.                   | Disputed  |                    |
|         | Debtor 1 only                                   |   |                    |
|         | Debtor 2 only                                   | Type of NONPRIORITY unsecured claim:  |                    |
|         | Debtor 1 and Debtor 2 only                      | Student loans   |                    |
|         | At least one of the debtors and another         | Obligations arising out of a separation agreement or divorce  |                    |
|         | Check if this claim relates to a                | that you did not report as priority claims  |                    |
| ١,      | community debt s the claim subject to offest?   | Debts to pension or profit-sharing plans, and other similar debts   |                    |
|         | No  | Other. Specify Collecting for Creditor  |                    |
|         | Yes   | Other. Opcomy   |                    |
| 4.19    | WF/EFS  | Last 4 digits of account number 9766  | \$ <u>0.00</u>     |
|         | Creditor's Name                                 | When was the debt incurred? 2009-2010   |                    |
|         | Po Box 13667                                    | When was the debt incurred?   |                    |
|         | Number Street                                   |   |                    |
|         |   | As of the date you file, the claim is: Check all that apply.  |                    |
|         | Sacramento CA 95853                             | Contingent  |                    |
|         | City State Zip Code                             | Unliquidated  |                    |
| !       | Who owes the debt? Check one.                   | Disputed  |                    |
|         | Debtor 1 only                                   |   |                    |
|         | Debtor 2 only                                   | Type of NONPRIORITY unsecured claim:  |                    |
|         | Debtor 1 and Debtor 2 only                      | Student loans   |                    |
|         | At least one of the debtors and another         | Obligations arising out of a separation agreement or divorce  |                    |
|         | Check if this claim relates to a                | that you did not report as priority claims  |                    |
|         | community debt s the claim subject to offest?   | Debts to pension or profit-sharing plans, and other similar debts   |                    |
|         | No  | Other. Specify  |                    |
|         | Yes   |   |                    |

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| - 1 | 4.20       |  |   |                |
|-----|------------|--|---|----------------|
| Ī   |            | Creditor's Name                                    |   |                |
| ı   |            | Po Box 13667                                       | When was the debt incurred? 2009-2010                             |                |
| ı   |            | Number Street                                      |   |                |
| ı   |            |  |   |                |
| ı   |            |  | As of the date you file, the claim is: Check all that apply.      |                |
| ı   |            | 0.4.05050  | Contingent  |                |
| ı   |            | Sacramento CA 95853                                | Unliquidated  |                |
| ı   | 14         | City State Zip Code  Who owes the debt? Check one. | Disputed  |                |
| ı   | \ ``       | _  |   |                |
| ı   |            | Debtor 1 only                                      |   |                |
| ı   | ∣ <u>⊾</u> | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                |
| ı   | L          | Debtor 1 and Debtor 2 only                         | Student loans   |                |
| ı   |            | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                |
| ı   | Г          | Check if this claim relates to a                   | that you did not report as priority claims                        |                |
| ı   | _          | community debt                                     | Debts to pension or profit-sharing plans, and other similar debts |                |
| ı   | Is         | the claim subject to offest?                       | _   |                |
| ı   |            | No   | Other. Specify  |                |
|     |            | Yes  |   |                |
| ſ   | 4.21       | WF/EFS   | Last 4 digits of account number 5410                              | \$ <u>0.00</u> |
| Ì   |            | Creditor's Name                                    |   |                |
| ı   |            | Po Box 13667                                       | When was the debt incurred? 2010-2010                             |                |
| ı   |            | Number Street                                      |   |                |
| ı   |            |  | As of the date you file, the claim is: Check all that apply.      |                |
| ı   |            |  |   |                |
| ı   |            | Sacramento CA 95853                                | Contingent  |                |
| ı   |            | City State Zip Code                                | Unliquidated  |                |
| ı   | ٧.         | Who owes the debt? Check one.                      | Disputed  |                |
| ı   |            | Debtor 1 only                                      |   |                |
| ı   | ▎ ┌        | Debtor 2 only                                      | Type of NONPRIORITY unsecured claim:                              |                |
| ı   | Ī          | Debtor 1 and Debtor 2 only                         | Student loans   |                |
| ı   |            | At least one of the debtors and another            | Obligations arising out of a separation agreement or divorce      |                |
|     |            |  | that you did not report as priority claims                        |                |
|     | L          | Check if this claim relates to a                   |   |                |
|     | le le      | community debt<br>s the claim subject to offest?   | Debts to pension or profit-sharing plans, and other similar debts |                |
|     |            | No   |   |                |
|     |            |  | Other. Specify  |                |
|     |            | Vec.   |   |                |

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Page 27 of 58 Case Number (if known) Barbara Lacretia Debtor 1

Document

Wheeling City

60090

State Zip Code

List Others to Be Notified for a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Lake County Superior Court, 45D09-1703-CC-40160 On which entry in Part 1 or Part 2 list the original creditor? Name 2293 N. Main Street Line 16 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number Street Crown Point IN 46307 Last 4 digits of account number \_\_\_\_ \_\_\_ State Zip Code Charles C. Gaver On which entry in Part 1 or Part 2 list the original creditor? Name Line \_\_16 \_\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims 121 S main St Street Part 2: Creditors with Nonpriority Unsecured Claims Number IN 46516 Last 4 digits of account number \_\_\_\_ \_\_\_ City State Zip Code Clerk, First Mun Div, 17M1104952 On which entry in Part 1 or Part 2 list the original creditor? Name 50 W. Washington St., Rm. 1001 Line \_\_17\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Number Chicago IL 60602 Last 4 digits of account number \_\_\_\_ \_\_\_ State Zip Code City Blitt and Gaines, PC, 17M1104952 On which entry in Part 1 or Part 2 list the original creditor? Name Line \_\_17\_ of (Check one): Part 1: Creditors with Priority Unsecured Claims 661 Glenn Ave. Part 2: Creditors with Nonpriority Unsecured Claims Number

Last 4 digits of account number \_\_\_\_ \_\_\_

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Debtor 1 Barbara

Lacretia

Document

Add the Amounts for Each Type of Unsecured Claim

| 6. | Total the amounts of certain types of unsecured claims. | This information is for statistical reporting purposes only. 28 U.S.C. § 159. |
|----|---|---|
|    | Add the amounts for each type of unsecured claim.       |   |

|                             |  |            | Total claim        |           |
|-----------------------------|--|------------|--------------------|-----------|
| Total claims from Part 1    | 6a. Domestic support obligations   | 6a.        | \$                 | 0.00      |
| Hom Fait I                  | 6b. Taxes and Certain other debts you owe the government   | 6b.        | \$                 | 0.00      |
|                             | 6c. Claims for death or personal injury while you were intoxicated   | 6c.        | \$                 | 0.00      |
|                             | 6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.   | 6d.        | \$                 | 0.00      |
|                             | 6e. <b>Total.</b> Add lines 6a through 6d.   | 6e.        | \$                 | 0.00      |
|                             |  |            |                    |           |
|                             |  |            | Total claim        |           |
| Total claims                | 6f. Student loans  | 6f.        | Total claim        | 17,299.00 |
| Total claims<br>from Part 2 | 6f. Student loans  6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims   | 6f.<br>6g. | Total claim  \$    | 17,299.00 |
|                             | 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority   |            | Total claim  \$ \$ | <u> </u>  |
|                             | <ul> <li>6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> <li>6h. Debts to pension or profit-sharing plans, and other</li> </ul> | 6g.        | \$<br>\$           | 0.00      |

|                   |   | Caso 17   |   | ilad 12/05/17                | Entor                  |   | 17:07:18  | Desc Main    |              |
|-------------------|---|---|---|------------------------------|------------------------|---|---|--------------|--------------|
| Fil               | l in this in                                    | formation to ident  | tify your case:   |                              |                        | 9 of 58   |   |              |              |
| De                | ebtor 1   | Barbara   | Lacretia  | Henderson                    |                        |   |   |              |              |
|                   |   | First Name  | Middle Name   | Last Name                    |                        |   |   |              |              |
|                   | ebtor 2<br>ouse, if filing)                     | First Name  | Middle Name   | Last Name                    | -                      |   |   |              |              |
| Ur                | nited States                                    | Bankruptcy Court for  | the : <u>NORTHERN</u> District of <u>I</u>  | LLINOIS                      |                        |   |   |              |              |
| Ca                | ase Number                                      |   |   | (State)                      |                        |   |   | Check i      | f this is an |
|                   |   | orm 106G  |   |                              |                        | ı   |   | amende       | u iiiiig     |
|                   |   |   | ory Contracts and I   | Incominad Lag                |                        |   |   |              | 12/15        |
| nformadditi  1. D | nation. If nonal page o you hav No. Ch Yes. Fil | nore space is needs, write your name eany executory contect this box and so the information all of the informations are the each person contects. | cossible. If two married people ded, copy the additional page, e and case number (if known). contracts or unexpired leases? ubmit this form to the court with nation below even if the contract or company with whom you have | fill it out, number the en   | ou have not Schedule A | attach it to this page thing else to report of thing else to report of this property (Official what each contra | ge. On the top of a<br>on this form.<br>al Form 106A/B)<br>ct or lease is for ( | for          |              |
|                   | cample, re                                      |   | cell phone). See the instructions   | s for this form in the instr | ruction book           | klet for more examp   | les of executory co   | ontracts and |              |
| ı                 | Person or                                       | company with wh   | om you have the contract or le  | ase                          |                        | State what th   | e contract or leas  | e is for     |              |
| 2.1               |   |   |   |                              |                        |   |   |              |              |
|                   | Name  |   |   |                              |                        |   |   |              |              |
|                   | Number  | Street  |   |                              | _                      |   |   |              |              |
|                   | City  |   | State Zip C   | Code                         | _                      |   |   |              |              |
| 2.2               |   |   |   |                              |                        |   |   |              |              |
|                   | Name  |   |   |                              | _                      |   |   |              |              |
|                   | Number  | Street  |   |                              | _                      |   |   |              |              |
|                   | City  |   | State Zip C   | Code                         | _                      |   |   |              |              |
| 2.3               |   |   |   |                              |                        |   |   |              |              |
|                   | Name  |   |   |                              | _                      |   |   |              |              |
|                   | Number  | Street  |   |                              | _                      |   |   |              |              |
|                   | City  |   | State Zip C   | Code                         | _                      |   |   |              |              |
| 2.4               |   |   |   |                              |                        |   |   |              |              |
|                   | Name  |   |   |                              | _                      |   |   |              |              |
|                   | Number  | Street  |   |                              | _                      |   |   |              |              |
|                   | City  |   | State Zip C   | Code                         | _                      |   |   |              |              |
| 2.5               |   |   |   |                              |                        |   |   |              |              |
|                   | Name  |   |   |                              | _                      |   |   |              |              |
|                   | Number  | Street  |   |                              | _                      |   |   |              |              |

State Zip Code

City

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| Fill in this information to identify your case: |                        |                                   |                     |  |  |
|---|------------------------|-----------------------------------|---------------------|--|--|
| Debtor 1  | Barbara                | Lacretia                          | Henderson           |  |  |
|   | First Name             | Middle Name                       | Last Name           |  |  |
| Debtor 2  |                        |                                   |                     |  |  |
| (Spouse, if filing)                             | First Name             | Middle Name                       | Last Name           |  |  |
| United States                                   | Bankruptcy Court for t | he: <u>NORTHERN</u> District of _ | ILLINOIS<br>(State) |  |  |
| Case Number                                     | r                      |                                   | _                   |  |  |
| (If known)                                      |                        |                                   |                     |  |  |

# Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any A       | dditional Pages, write your name ar   | nd case number (if known). Answ          | er every question.   |   |
|-------------|---|--|----------------------|---|
| 1. <b>D</b> | o you have any codebtors? (If you a   | re filing a joint case, do not list eith | ner spouse as a code | btor.)  |
|             | No.   |  |                      |   |
|             | Yes   |  |                      |   |
|             | lithin the last 8 years, have you liverizona, California, Idaho, Lousiiana, N |  | • ,                  | unity property states and territories include and Wisconsin.) |
|             | No. Go to line 3.   |  |                      |   |
|             | Yes. Did your spouse, former spo  | use, or legal equivalent live with yo    | ou at the time?      |   |
|             |   | e or territory did you live?             | Fill ir              | n the name and current address of that person.                |
|             | Name of your spouse, former spouse or   | legal equivalent                         |                      |   |
|             |   |  |                      |   |
|             | Number Street   |  |                      |   |
|             | City  | State                                    | Zip Code             |   |
| 3           | chedule E/F, or Schedule G to fill ou   | at Column 2.                             |                      | Column 2: The creditor to whom you owe the debt               |
|             |   |  |                      | Check all schedules that apply:                               |
| 3.1         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
|             | City  | State                                    | Zip Code             |   |
| 3.2         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
| _           | City  | State                                    | Zip Code             |   |
| 3.3         |   |  |                      | Schedule D, line  |
|             | Name  |  |                      | Schedule E/F, line  |
|             | Number Street   |  |                      | Schedule G, line  |
|             | City  | State                                    | Zip Code             |   |

Official Form 106H Record # 753156 Schedule H: Your Codebtors Page 1 of 1

|  |            |             | 7(7(7))   |  |  |
|--|------------|-------------|-----------|--|--|
| Fill in this information to identify your case:                                    |            |             |           |  |  |
| Debtor 1   | Barbara    | Lacretia    | Henderson |  |  |
|  | First Name | Middle Name | Last Name |  |  |
| Debtor 2   |            |             |           |  |  |
| Spouse, if filing)   | First Name | Middle Name | Last Name |  |  |
| United States Bankruptcy Court for the :NORTHERN DISTRICT OF ILLINOIS  Case Number |            |             |           |  |  |
| If known)  |            |             |           |  |  |
|  |            |             |           |  |  |

|   | ck if this is:                              |
|---|---|
| Ш | An amended filing                           |
|   | A supplement showing post-petition          |
|   | chapter 13 income as of the following date: |
|   |   |
|   | MM / DD / YYYY                              |

# Official Form 106I

#### **Schedule I: Your Income**

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Describe Employment  |                                 |                                    |                        |                                   |
|----|--|---------------------------------|------------------------------------|------------------------|-----------------------------------|
| 1. | Fill in your employment information  |                                 | Debtor 1                           |                        | Debtor 2 or non-filing spouse     |
|    | If you have more than one job, attach a separate page with information about additional employers.   | Employment status               | X Employed Not employed            |                        | Employed  Not employed            |
|    | Include part-time, seasonal, or self-employed work.  | Occupation                      | Referral Service A                 | Assistant              |                                   |
|    | Occupation may Include student or homemaker, if it applies.  | Employers name                  | AIM Specialty Hea                  | alth                   |                                   |
|    |  | Employers address               | 2 Westbrook Cool Westchester, IL 6 | rporate Center Suite 8 | ,                                 |
|    |  | How long employed there?        | Since 3/1/2016                     |                        |                                   |
| Pa | Part 2: Give Details About Monthly Income  |                                 |                                    |                        |                                   |
|    | Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse has lines below. If you need more space      | ve more than one employer, comb | oine the information for a         |                        |                                   |
|    |  |                                 |                                    | For Debtor 1           | For Debtor 2 or non-filing spouse |
| 2. | List monthly gross wages, salary and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. |                                 |                                    | \$4,203.16             | \$0.00                            |
| 3. | 3. Estimate and list monthly overtime pay.   |                                 |                                    | \$0.00                 | \$0.00                            |
| 4. | 4. Calculate gross income. Add line 2 + line 3.  |                                 |                                    | \$4,203.16             | \$0.00                            |

 Official Form 106I
 Record # 753156
 Schedule I: Your Income
 Page 1 of 2

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Debtor 1

Barbara Lacretia Document Henderson Page 32

Case Number (if known)

|              |              |  |             | For Debtor 1 |          | Debtor 2 or<br>n-filing spouse |     |            |
|--------------|--------------|--|-------------|--------------|----------|--------------------------------|-----|------------|
|              | Copy         | y line 4 here  | 4.          | \$4,203.16   |          | \$0.00                         |     |            |
| 5. <b>L</b>  | ist all      | payroll deductions:  |             |              |          |                                |     |            |
|              | 5a. <b>T</b> | ax, Medicare, and Social Security deductions   | 5a.         | \$440.55     |          | \$0.00                         |     |            |
|              | 5b. <b>N</b> | Mandatory contributions for retirement plans   | 5b.         | \$0.00       |          | \$0.00                         |     |            |
|              | 5c. <b>V</b> | oluntary contributions for retirement plans  | 5c.         | \$0.00       |          | \$0.00                         |     |            |
|              | 5d. <b>F</b> | Required repayments of retirement fund loans   | 5d.         | \$0.00       |          | \$0.00                         |     |            |
|              | 5e. <b>I</b> | nsurance   | 5e.         | \$163.13     |          | \$0.00                         |     |            |
|              | 5f. <b>C</b> | Domestic support obligations   | 5f.         | \$0.00       |          | \$0.00                         |     |            |
|              | 5g. <b>L</b> | Jnion dues   | 5g.         | \$0.00       |          | \$0.00                         |     |            |
|              | 5h. <b>C</b> | Other deductions. Specify: Life Insurance(D1), Health saving acct(D1),   | 5h.         | \$28.02      |          | \$0.00                         |     |            |
| 6. <b>A</b>  | dd the       | payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h.   | 6.          | \$631.69     |          | \$0.00                         |     |            |
| 7. C         | alcula       | te total monthly take-home pay. Subtract line 6 from line 4.   | 7.          | \$3,571.47   |          | \$0.00                         |     |            |
| 8. <b>Li</b> | st all       | other income regularly received:   |             | , ,          |          |                                |     |            |
|              | 8a.          | Net income from rental property and from operating a business,   |             |              |          |                                |     |            |
|              |              | profession, or farm  |             |              |          |                                |     |            |
|              |              | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total  |             |              |          |                                |     |            |
|              |              | monthly net income.  | 8a.         | \$0.00       |          | \$0.00                         |     |            |
|              | 8b.          | Interest and dividends   | 8b.         | \$0.00       |          | \$0.00                         |     |            |
|              | 8c.          | Family support payments that you, a non-filing spouse, or a dependent regularly receive  | 8c.         | \$ 0.00      |          | \$ 0.00                        |     |            |
|              |              | Include alimony, spousal support, child support, maintenance, divorce  |             |              |          |                                |     |            |
|              |              | settlement, and property settlement.   |             |              |          |                                |     |            |
|              | 8d.          | Unemployment compensation  | 8d.         | \$0.00       |          | \$0.00                         |     |            |
|              | 8e.          | Social Security  | 8e.         | \$0.00       |          | \$0.00                         |     |            |
|              | 8f.          | Other government assistance that you regularly receive   | 8f.         | \$0.00       |          | \$0.00                         |     |            |
|              |              | Include cash assistance and the value (if known) of any non-cash   |             | 7            |          | *****                          |     |            |
|              |              | assistance that you receive, such as food stamps (benefits under the   |             |              |          |                                |     |            |
|              |              | Supplemental Nutrition Assistance Program) or housing subsidies.   |             |              |          |                                |     |            |
|              |              | Specify:   |             |              |          |                                |     |            |
|              | 8g.          | Pension or retirement income   | 8g.         | \$0.00       |          | \$0.00                         |     |            |
|              | 8h.          | Other monthly income. Specify:   | 8h.         | \$0.00       |          | \$0.00                         |     |            |
| 9.           | Add          | <b>all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.  | 9.          | \$0.00       |          | \$0.00                         |     |            |
| 10.          | Calc         | ulate monthly income. Add line 7 + line 9.   | 10.         | \$3,571.47   | + [      | \$0.00                         | - [ | \$3,571.47 |
|              | Add          | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.   |             |              | <u> </u> |                                |     | , -,-      |
| 11.          | Inclu        | e all other regular contributions to the expenses that you list in <i>Schedu</i> de contributions from an unmarried partner, members of your household, you friends or relatives.  ot include any amounts already included in lines 2-10 or amounts that are | your depend |              |          | lule J.                        |     |            |
|              | Spec         | cify:  |             |              |          |                                | 11  | \$0.00     |
| 12.          |              | the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Co  |             | •            |          | s                              | 12. | \$3,571.47 |
| 13.          |              | ou expect an increase or decrease within the year after you file this form   |             |              |          | -                              |     | ,          |
|              | X            |  |             |              |          |                                |     |            |

| Fill in this ir                 | formation to identify y   | our case:                               |   |  |  |                              |
|---------------------------------|---|---|---|--|--|------------------------------|
| Debtor 1                        | Barbara   | Lacretia                                | Henderson   | Check if this is:  |  |                              |
|                                 | First Name  | Middle Name                             | Last Name   | An amende  | ŭ                                      |                              |
| Debtor 2<br>(Spouse, if filing) | First Name  | Middle Name                             | Last Name   |  | ent showing post<br>of the following d | -petition chapter 13<br>ate: |
| United States                   | Bankruptcy Court for the :  | NORTHERN DISTRICT O                     | F ILLINOIS  |  |  |                              |
| Case Numbe                      | Γ   |   | _   | MM / DD /  | YYYY                                   |                              |
|                                 | 4001  |   |   | A separate   | e filing for Debtor                    | 2 because Debtor 2           |
| Official F                      | orm 106J  |   |   | maintains a  | a separate house                       | hold.                        |
| Schedul                         | e J: Your Ex  | penses                                  |   |  |  | 12/14                        |
|                                 |   |   |   | re equally responsible for supply<br>es, write your name and case nur  | =                                      |                              |
| Part 1:                         | Describe Your Household   | d                                       |   |  |  |                              |
|                                 | Go to line 2.  Does Debtor 2 live in a  No.                       | separate household?                     | e J.  |  |  |                              |
| 2. Do you l                     | have dependents?  | No                                      |   | Dependent's relationship to  | Dependent's                            | Does dependent live          |
| Do not li<br>Debtor 2           | st Debtor 1 and   |   | this information for                                      | Debtor 1 or Debtor 2   | age                                    | with you?                    |
| Do not s                        | tate the dependents'  |   |   | Daughter   | 23                                     | X Yes                        |
| names.                          |   |   |   | Son  | 16                                     | No                           |
|                                 |   |   |   |  |  | X Yes                        |
|                                 |   |   |   | Daughter   | 12                                     | No<br>X Ves                  |
|                                 |   |   |   |  |  | X No                         |
|                                 |   |   |   |  |  | Yes                          |
|                                 |   |   |   |  |  | X No                         |
|                                 |   |   |   |  |  | Yes                          |
| expense                         | expenses include<br>s of people other than<br>and your dependents | 1 |   |  |  |                              |
| Part 2:                         | Estimate Your Ongoing N   | Monthly Expenses                        |   |  |  |                              |
| -                               | of a date after the bank  |   |   | as a supplement in a Chapter 13<br>check the box at the top of the for |  |                              |
|                                 | -   |   | nce if you know the value<br>Income (Official Form 106l.) |  | Y                                      | our expenses                 |
| 4. The ren                      | tal or home ownership   | expenses for your reside                | ence. Include first mortgage                              | payments and   |  |                              |
| any rent                        | for the ground or lot.  |   |   |  | 4.                                     | \$800.00                     |
| If not in                       | cluded in line 4:   |   |   |  |  |                              |
| 4a. Re                          | eal estate taxes  |   |   |  | 4a.                                    | \$0.00                       |
|                                 | operty, homeowner's, o  |   |   |  | 4b.                                    | \$0.00                       |
|                                 | ome maintenance, repai<br>omeowner's association                  | r, and upkeep expenses                  |   |  | 4c.<br>4d.                             | \$50.00<br>\$0.00            |
| 4u. nc                          | aneowner 5 association  | or condominium dues                     |   |  | 4u.                                    | Ψ0.00                        |

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Barbara Debtor 1

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Lacretia Case Number (if known) \_ First Name Middle Name Last Name

|             |   |      | Your expenses | S        |
|-------------|---|------|---------------|----------|
| 5           | Additional Mortgage payments for your residence, such as home equity loans                            | 5.   |               | \$0.00   |
| 6. I        | Itilities:  |      |               |          |
| (           | Sa. Electricity, heat, natural gas  | 6a.  |               | \$210.00 |
| (           | Sb. Water, sewer, garbage collection  | 6b.  |               | \$0.00   |
| (           | Sc. Telephone, cell phone, internet, satellite, and cable service                                     | 6c.  |               | \$300.00 |
| (           | Sd. Other. Specify:   | 6d.  | \$            | 0.00     |
| '. I        | Food and housekeeping supplies  | 7.   |               | \$750.0  |
| 3. (        | Childcare and children's education costs  | 8.   |               | \$0.0    |
| . (         | Clothing, laundry, and dry cleaning   | 9.   |               | \$220.0  |
| 0. <b>I</b> | Personal care products and services   | 10.  |               | \$55.0   |
| 1. I        | Medical and dental expenses   | 11.  |               | \$100.0  |
|             | <b>Fransportation.</b> Include gas, maintenance, bus or train fare.  On not include car payments.     | 12.  |               | \$352.0  |
| 3. I        | Entertainment, clubs, recreation, newspapers, magazines, and books                                    | 13.  |               | \$100.0  |
|             | Charitable contributions and religious donations  | 14.  |               | \$0.0    |
| _           | nsurance.   |      |               |          |
| I           | Oo not include insurance deducted from your pay or included in lines 4 or 20.                         |      |               |          |
|             | 5a. Life insurance  | 15a. |               | \$0.0    |
|             | 5b. Health insurance  | 15b. |               | \$0.0    |
|             | 5c. Vehicle insurance   | 15c. |               | \$125.0  |
|             | 5d. Other insurance. Specify:   | 15d. |               | \$0.0    |
| 6.          | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.                      |      |               |          |
| ;           | Specify:  | 16.  |               | \$0.0    |
| 7. <b>I</b> | nstallment or lease payments:   |      |               |          |
|             | 7a. Car payments for Vehicle 1  | 17a. |               | \$453.0  |
|             | 7b. Car payments for Vehicle 2  | 17b. |               | \$0.0    |
|             | 7c. Other. Specify:   | 17c. |               | \$0.0    |
|             | 7d. Other. Specify:   | 17d. |               | \$0.0    |
| 8. '        | our payments of alimony, maintenance, and support that you did not report as deducted                 |      |               |          |
| 1           | rom your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).                          | 18.  |               | \$0.0    |
| 9. (        | Other payments you make to support others who do not live with you.                                   |      |               |          |
| ;           | Specify:  | 19.  |               | \$0.0    |
| 0.          | Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. |      |               |          |
| 2           | 20a. Mortgages on other property  | 20a. |               | \$ 0.0   |
|             | 20b. Real estate taxes  | 20b. | \$            | 0.0      |
| 2           |   | 20c. | \$            | 0.0      |
|             | 20c. Property, homeowner's, or renter's insurance   |      |               | _        |
| 2           | 20c. Property, homeowner's, or renter's insurance<br>20d. Maintenance, repair, and upkeep expenses    | 20d. | \$            | 0.0      |

Schedule J: Your Expenses

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| Debtor | 1 Daibe   | Lacicia                               | T ICHUCISON                               | Case Number (if known) |              |            |
|--------|-----------|---------------------------------------|---|------------------------|--------------|------------|
|        | First Na  | ne Middle Name                        | Last Name                                 |                        |              |            |
| 21.    | Other. S  | pecify: Postage/Bank Fees (\$5.00),   |   | :                      | 21.          | \$5.00     |
| 22     | Your mo   | nthly expense: Add lines 4 through 2  | 1.  | :                      | 22.          | \$3,520.00 |
|        | The resu  | t is your monthly expenses.           |   |                        |              |            |
|        |           |                                       |   |                        |              |            |
|        |           |                                       |   |                        |              |            |
| 23.    | Calculate | your monthly net income.              |   |                        |              |            |
|        | 23a.      | Copy line 12 (your comibined month    | ly income) from Schedule I.               | 2                      | 3a.          | \$3,571.47 |
|        | 23b.      | Copy your monthly expenses from li    | ne 22 above.                              | 2                      | 3b. <b>-</b> | \$3,520.00 |
|        | 23c.      | Subtract your monthly expenses fro    | m your monthly income.                    | 2                      | 3c.          | \$51.47    |
|        |           | The result is your monthly net income | ne.                                       |                        |              |            |
|        |           |                                       |   |                        |              |            |
|        |           |                                       |   |                        |              |            |
|        |           |                                       |   |                        |              |            |
|        |           |                                       |   |                        |              |            |
|        | _         |                                       |   |                        |              |            |
| 24.    | -         |                                       | r expenses within the year after you fi   |                        |              |            |
|        |           |                                       | your car loan within the year or do you   | • •                    |              |            |
|        |           | payment to increase or decrease bec   | ause of a modification to the terms of yo | our mortgage?          |              |            |
|        | X No      |                                       |   |                        |              |            |
|        | Yes       | Explain Here:                         |   |                        |              |            |
|        |           |                                       |   |                        |              |            |
|        |           |                                       |   |                        |              |            |
|        |           |                                       |   |                        |              |            |
|        |           |                                       |   |                        |              |            |
|        |           |                                       |   |                        |              |            |

 Official Form 106J
 Record #
 753156
 Schedule J: Your Expenses
 Page 3 of 3

# Official Form 106 Dec

### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below  |   |
|---|---|
| Did you pay or agree to pay someone who is NOT an                 | attorney to help you fill out bankruptcy forms?   |
| No  | ,   |
| Yes. Name of Person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|   |   |
|   |   |
|   |   |
| Under penalty of perjury, I declare that I have read the correct. | e summary and schedules filed with this declaration and that they are true and                |
| <b>44</b>   |   |
| /s/ Barbara Lacretia Henderson Signature of Debtor 1              | Signature of Debtor 2   |
| Date 12/05/2017   |   |
| Date IZ/03/Z017 MM / DD / YYYY                                    | Date  |
|   |   |

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|                     |  | D(            | scament rade |  |  |  |  |  |
|---------------------|--|---------------|--------------|--|--|--|--|--|
| Fill in this in     | formation to identi  | fy your case: |              |  |  |  |  |  |
|                     |  |               |              |  |  |  |  |  |
|                     |  |               |              |  |  |  |  |  |
| Debtor 1            | Barbara  | Lacretia      | Henderson    |  |  |  |  |  |
|                     | First Name   | Middle Name   | Last Name    |  |  |  |  |  |
| D-h4 0              |  |               |              |  |  |  |  |  |
| Debtor 2            |  |               |              |  |  |  |  |  |
| (Spouse, if filing) | First Name   | Middle Name   | Last Name    |  |  |  |  |  |
|                     |  |               |              |  |  |  |  |  |
| United States       | United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> |               |              |  |  |  |  |  |
|                     |  |               | (State)      |  |  |  |  |  |
| Case Number         | r  |               | _            |  |  |  |  |  |
| (If known)          |  |               |              |  |  |  |  |  |
|                     |  |               |              |  |  |  |  |  |

### Official Form 107

#### Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| num | number (if known). Answer every question.  |                        |             |                |  |  |  |  |  |
|-----|--|------------------------|-------------|----------------|--|--|--|--|--|
| F   | ar. 11 Give Details About Your Marital Status and Where Yo   | ou Lived Before        |             |                |  |  |  |  |  |
| 01. | 01. What is your current marital status?   |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     | Not married  |                        |             |                |  |  |  |  |  |
|     | _  |                        |             |                |  |  |  |  |  |
| 02  | During the last 3 years, have you lived anywhere other tha   | n where you live now   | 1?          |                |  |  |  |  |  |
|     | No.  |                        | the man     |                |  |  |  |  |  |
|     | Yes. List all of the places you lived in the last 3 years. Do  | o not include where yo | u live now. |                |  |  |  |  |  |
|     | Debtor 1   | Dates Debtor 1         | Debtor 2:   | Dates Debtor 2 |  |  |  |  |  |
|     |  | lived there            |             | lived there    |  |  |  |  |  |
| 03  | Within the last 8 years, did you ever live with a spouse or l property states and territories include Arizona, California, and Wisconsin.) |                        |             |                |  |  |  |  |  |
|     | No.  |                        |             |                |  |  |  |  |  |
|     | Yes. Make sure you fill out Schedule H: Your Codebtors (   | (Official Form 106H).  |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
| F   | Explain the Sources of Your Income   |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |
|     |  |                        |             |                |  |  |  |  |  |

Case 17-36180 Doc 1 Filed 12/05/17 Entered 12/05/17 17:07:18 Desc Main Document Page 38 of 58 Debtor 1 Barbara Lacretia Henderson Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$34,000 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, Wages, commissions, \$49,000 For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2016) Operating a business Operating a business Wages, commissions, \$49,000 Wages, commissions, For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

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Lacretia Henderson Case Number (if known)

|    | First Name   | Middle Name   | La                   | ast Name       |                           |                              |                                |  |  |
|----|--|---|----------------------|----------------|---------------------------|------------------------------|--------------------------------|--|--|
| 06 | Are either Debte   | or 1's or Debtor 2's debts pri                                    | marily consumer      | debts?         |                           |                              |                                |  |  |
|    |  |   |                      |                |                           |                              |                                |  |  |
|    | No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as  |   |                      |                |                           |                              |                                |  |  |
|    | "incurred by an individual primarily for a personal, family, or household purpose."  During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,225* or more? |   |                      |                |                           |                              |                                |  |  |
|    | bulling the 30 days before you filed for balling picy, did you pay any creditor a total of \$0,225. Or more:   |   |                      |                |                           |                              |                                |  |  |
|    | No. Go to line 7.  |   |                      |                |                           |                              |                                |  |  |
|    | Yes. List below each creditor to whom you paid a total of \$6,225* or more in one or more payments and the   |   |                      |                |                           |                              |                                |  |  |
|    |  | al amount you paid that credito                                   |                      |                |                           |                              |                                |  |  |
|    | chi  | ld support and alimony. Also, o                                   | do not include pay   | ments to an    | attorney for this bank    | ruptcy case.                 |                                |  |  |
|    | * Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.  |   |                      |                |                           |                              |                                |  |  |
|    | _  | r 1 or Debtor 2 or both have                                      | -                    |                |                           |                              |                                |  |  |
|    | During   | the 90 days before you filed t                                    | for bankruptcy, dic  | d you pay an   | y creditor a total of \$6 | 600 or more?                 |                                |  |  |
|    | ☐ No   | . Go to line 7.   |                      |                |                           |                              |                                |  |  |
|    | Ye.  | s. List below each creditor to v                                  | vhom you paid a to   | otal of \$600  | or more and the total     | amount you paid that         |                                |  |  |
|    | cre  | ditor. Do not include payments                                    | s for domestic sup   | port obligati  | ons, such as child sup    | oport and                    |                                |  |  |
|    | alir   | mony. Also, do not include pay                                    | ments to an attorr   | ney for this b | oankruptcy case.          |                              |                                |  |  |
|    |  |   |                      |                |                           |                              |                                |  |  |
|    |  |   | Dat                  | es of          | Total amount paid         | Amount you still o           | owe Was this payment for       |  |  |
|    |  |   | pay                  | ments          |                           |                              |                                |  |  |
|    |  |   |                      |                |                           |                              |                                |  |  |
|    |  | GM Financial Po Box 181145  | Mon                  | thly           | \$ 1,359                  | \$ 18,749                    | Mortgage                       |  |  |
|    |  | Arlington TX 76096  |                      |                |                           |                              | Car                            |  |  |
|    |  |   |                      |                |                           |                              | Credit card                    |  |  |
|    |  |   |                      |                |                           |                              | Loan repayment                 |  |  |
|    |  |   |                      |                |                           |                              | ☐ Suppliers or vendors ☐ Other |  |  |
|    |  |   |                      |                |                           |                              |                                |  |  |
|    |  |   |                      |                |                           |                              |                                |  |  |
|    |  |   |                      |                |                           |                              |                                |  |  |
| 07 | Within 1 year he   | fore you filed for bankruptcy, o                                  | did you make a na    | vment on a     | debt you owed anyon       | e who was an insider?        |                                |  |  |
|    | Insiders include   | your relatives; any general pa                                    | rtners; relatives of | any genera     | l partners; partnership   | os of which you are a genera |                                |  |  |
|    |  | which you are an officer, direct<br>one for a business you operat | · •                  | ,              |                           | ,                            | , ,                            |  |  |
|    |  | pport and alimony.  | e as a sole propri   | ctor. 11 0.0   | .o. § 101. Illolude pay   | ments for domestic support   | obligations,                   |  |  |
|    | No.  |   |                      |                |                           |                              |                                |  |  |
|    | <u> </u>   | payments to an insider.   |                      |                |                           |                              |                                |  |  |
|    | _  | •   | Dat                  | es of          | Total amount              | Amount you still             | Reason for this payment        |  |  |
|    |  |   | pay                  | ment           | paid                      | owe                          |                                |  |  |
| 08 | -  | fore you filed for bankruptcy, c                                  | did you make any     | payments o     | r transfer any property   | on account of a debt that b  | enefited                       |  |  |
|    | an insider?<br>Include payment   | ts on debts guaranteed or cosi                                    | igned by an inside   | er.            |                           |                              |                                |  |  |
|    | No.  |   |                      |                |                           |                              |                                |  |  |
|    | =  | payments to an insider.   |                      |                |                           |                              |                                |  |  |
|    |  | •   | Dat                  | es of          | Total amount              | Amount you still             | Reason for this payment        |  |  |
|    |  |   | pay                  | ment           | paid                      | owe                          | Include creditor's name        |  |  |
| F  | art 4: Identify  | Legal actions, Repossessions                                      | , and Foreclosures   | i              |                           |                              |                                |  |  |
|    |  |   |                      |                |                           |                              |                                |  |  |
|    |  |   |                      |                |                           |                              |                                |  |  |
|    |  |   |                      |                |                           |                              |                                |  |  |
|    |  |   |                      |                |                           |                              |                                |  |  |

Barbara

Debtor 1

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Barbara Lacretia Henderson Case Number (if known) Debtor 1 First Name Middle Name Last Name Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Yes. Fill in the details. Nature of the case Court or agency Status of the case Pending Collection Cook C- 1st Municipal Div. Portfolio Recovery Associates Llc VS On appeal Barbara Henderson ☐ Concluded CASE NUMBER#17M1104952 Pending Heritage Acceptance v. Henderson – Collections Lake P County Court On appeal 45D09-1703-CC-40160 ☐ Concluded 10 Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11 Yes. Fill in the information below. 11 Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No. Go to line 11 Yes. Fill in the information below. 12 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No. Yes. **List Certain Gifts and Contributions** 13 Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. 14 Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift. List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No. Yes. Fill in the details for each gift. List Certain Payments or Transfers Part 7: Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ∏ No. Yes. Fill in the details

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Case Number (if known)

Henderson

First Name Middle Name Last Name Party Contact Info Description and value of any property transferred Date payment Amount of payment or transfer Geraci Law L.L.C. \$800.00 55 E. Monroe Street #3400 Chicago,IL 60603 **Party Contact Info** Description and value of any property transferred Date payment Amount of payment or transfer Credit Counseling Services 2017 \$25.00 Hananwill Credit Counseling 115 N. Cross St Robinson, IL 62454 17 Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No. Yes. Fill in the details. 18 Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. Yes. Fill in the details for each gift. 19 Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)  $\prod$  Yes. Fill in the details for each gift. List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account number Type of account or Date account was Last balance before instrument closed, sold, moved. closing or transfer or transferred 21 Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it?

Barbara

Debtor 1

Lacretia

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Barbara Lacretia Henderson Case Number (if known) Debtor 1 First Name Middle Name Last Name 22 Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else has or had access to it? Describe the contents have it? Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No. Yes. Fill in the details. Where is the property? Describe the property Value **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24 Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 25 Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice 26 Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. Court or agency Nature of the case Status of the case Give Details About Your Business or Connections to Any Business Part 11: 27 Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) A partner in a partnership An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business.

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| ebtor 1 | Barbara                                       | Lacretia                                       | Henderson                           | Case Number (if known)                              |  |
|---------|---|--|-------------------------------------|---|--|
|         | First Name                                    | Middle Name                                    | Last Name                           |   |  |
|         | thin 2 years before yetitutions, creditors, c | • • •  | you give a financial statement to   | anyone about your business? Include all financial   |  |
|         | No.   |  |                                     |   |  |
|         | Yes. Fill in the detail                       | S.   |                                     |   |  |
|         |   | Date is:                                       | sued                                |   |  |
| Part 12 | Sign Below                                    |  |                                     |   |  |
| in co   |   | kruptcy case can result in f<br>519, and 3571. | ines up to \$250,000, or imprisonm  |   |  |
|         | Signature of Debtor                           | 1  | Signature of De                     | btor 2  |  |
|         | Date 12/05/2017 MM / DD / Y                   | YYYY   | Date                                |   |  |
| Did y   | No<br>Yes<br>You pay or agree to p            | pay someone who is not an                      | attorney to help you fill out bankr |   |  |
| □`      | res. Name of persor                           | 1  |                                     | . Attach the Bankruptcy Petition Preparer's Notice, |  |

Declaration, and Signature (Official Form 119).

| Fill in this         | Case 17.3                            |   | ilod 12/05/17   | 2/05/17 17:07:18 Desc Main  |
|----------------------|--------------------------------------|---|---|---|
|                      |                                      |   | 4 01  | 30  |
| Debtor 1             | Barbara                              | Lacretia  Middle Name                     | Henderson   |   |
| Debtor 2             | First Name                           | Middle Name                               | Last Name   |   |
| (Spouse, if filing   | ng) First Name                       | Middle Name                               | Last Name   |   |
| United Sta           | ates Bankruptcy Court for th         | e : <u>NORTHERN</u> District of <u>II</u> | LINOIS  |   |
| Case Num             |                                      |   | (State)   | Check if this is an   |
| (If known)           |                                      |   | -   | amended filing  |
| Official             | Form 108                             |   |   |   |
|                      |                                      | ion for Individual                        | s Filing Under Chapter  | 7 12  |
| f you are an         | individual filing under              | chapter 7, you must fill out th           | nis form if:  |   |
|                      | nave claims secured by               |   |   |   |
| =                    |                                      | ty and the lease has not expi             |   |   |
|                      |                                      | -   | e your bankruptcy petition or by the date  . You must also send copies to the credi | -   |
|                      | •                                    |   | equally responsible for supplying correc  | •   |
|                      | s must sign and date th              | -   | oquality responses to capping contest   |   |
| Be as comple         | ete and accurate as po               | ssible. If more space is need             | ed, attach a separate sheet to this form. (   | On the top of any additional pages,                                   |
| vrite your na        | ame and case number                  | (if known).                               |   |   |
| Part 1:              | List Your Creditors W                | ho Have Secured Claims                    |   |   |
| =                    | creditors that you listed ion below. | d in Part 1 of Schedule D: Cre            | ditors Who Have Claims Secured by Pro   | perty (Official Form 106D), fill in the                               |
| Identify ti          | he creditor and the pro              | perty that is collateral                  | What do you intend to do with secures a debt?                                       | the property that Did you claim the property as exempt on Schedule C? |
| Creditor             | r's                                  |   | ☐ Surrender the proper  | ty 🔳 No   |
| name:                | GM Financia                          | al  | Retain the property a   | <del>-</del>  |
| Descrip              | otion of 2017 Chevro                 | olet Sonic with over 11,000 mile          | es Retain the property a  | _   |
| property             | Allori Oi                            | ,,,,,                                     | Reaffirmation Agreer  | ment.   |
| securing             |                                      |   | Retain the property a   | and [explain]:  |
|                      |                                      |   |   |   |
| Creditor             | r's                                  |   | Surrender the proper  | ty  |
| name:                |                                      |   | Retain the property a   | und made and it   |
|                      |                                      |   | Retain the property a   |   |
| Descript<br>property |                                      |   | Reaffirmation Agreer  |   |
| securing             |                                      |   | Retain the property a   |   |
|                      | 9 4021                               |   |   |   |
| Creditor             | <br>r's                              |   | Surrender the proper  | ty  |
| name:                |                                      |   | Retain the property a   | and redeem it   |
|                      |                                      |   | Retain the property a   |   |
| Descrip              |                                      |   | Reaffirmation Agreer  |   |
| property<br>securing | -                                    |   | Retain the property a   |   |
| 2234.11              | J                                    |   |   |   |
| Creditor             | r's                                  |   | Surrender the proper  | ty  |
| name:                |                                      |   | Retain the property a   | and redeem it   |
| Б .                  | -t:t                                 |   | Retain the property a   |   |
| Descrip              | otion of                             |   |   |   |
| property             | V                                    |   | Reaffirmation Agreer  | ment.   |

Debtor 1

Barbara Case 17-36180 Lacretia

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List Your Unexpired Personal Property Leases Part 2:

| fill in the information below. Do not list real estate lea   | isted in Schedule G: Executory Contracts and Unexpired Leases. Unexpired leases are leases that are still in effect; the erty lease if the trustee does not assume it. 11 U.S.C. § 365( | lease period has not yet   |
|--|---|----------------------------|
| Describe your unexpired personal property lease  | es  | Will the lease be assumed? |
| Lessor's name:   |   | □ No                       |
|  |   | Yes                        |
| Description of leased property:  |   |                            |
| Lessor's name:   |   | □ No                       |
| Description of leased property:  |   | ☐ Yes                      |
| Lessor's name:   |   | □ No                       |
| Description of leased property:  |   | ☐Yes                       |
| Lessor's name:   |   | No                         |
| Description of leased property:  |   | □Yes                       |
| Lessor's name:   |   | □No                        |
| Description of leased property:  |   | □Yes                       |
| Lessor's name:   |   | No                         |
| Description of leased property:  |   | □Yes                       |
| Lessor's name:   |   | □No                        |
| Description of leased property:  |   | ☐ Yes                      |
| Part 3: Sign Below   |   |                            |
| Under penalty of perjury, I declare that I have indicate<br>personal property that is subject to an unexpired leas | d my intention about any property of my estate that secures<br>e.   | a debt and any             |
| /s/ Barbara Lacretia Henderson Signature of Debtor 1   | Signature of Debtor 2   |                            |
| Dated: 12/05/2017  | Date  |                            |
| MM / DD / YYYY   | MM / DD / YYYY  |                            |

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B2030 (Form 2030) (12/15)

Date

### United States Bankruptcy Court

NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION In re Barbara Lacretia Henderson / Debtor Case No: Chapter: Chapter 7 DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows: For legal services, I have agreed to accept \$800.00 Prior to the filing of this statement I have received \$800.00 Balance Due \$0.00 The source of the compensation paid to me was: Debtor(s) Other: (specify) The source of compensation to be paid to me is: Debtor(s) Other: (specify) I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm. I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in Preparation and filing of any petition, schedules, statements of affairs and plan which may be required; By agreement with the debtor(s), the above-disclosed fee does not include the following service: Fee does NOT include any work done post-filing. CERTIFICATION I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings. Date: 12/05/2017 /s/ Jon Kurt Clasing

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Signature of Attorney

Geraci Law L.L.C. Name of law firm

### Case 17-36180 Geraci Law Filed 2/01/1/2 Intered 12/05/1/ 17:07:18 Desc Meadquarters: 55 E. Monroe Street, #3400 Chicago, 91-60661 866.928.9/67 CPENT CORNER WWW.INFOTAPES.COM 17:07:18 Desc Main

Date: 10/7/2017

Consultation Attorney: SAL

Record #: **753-156** 



### Retainer Agreement Chapter 7 - Pre-filing

| Services before filing in Court: I retain Geraci Lay L.L.C. to prepare to file a Chapter 7 bankruptcy petition in court. I agree to pay, by debit only, a flat fee for services before filing in court of \$ 800.00 at \$ } today, \$ } per { } starting {   |
|--|
| and \${} I will obtain from {  |
| After we file your Chapter 7 bankruptcy in Court, we will advance your Court Cost of \$335, and the flat fee for services after case filing is \$\frac{1.295.00}{8.335} = \$\frac{1.630.00}{1.630.00}\$ total flat fee. We will present you with an agreement to repay the \$335, and pay a fee for our services after filing through Discharge or case closing without discharge. Whether or not you sign a post-filing agreement is entirely voluntary: you are not required to retain Geraci Law for post-bankruptcy services. You may hire some other law firm to finish your bankruptcy and Geraci Law may withdraw from representing you.  |
| The flat fee for pre-filing work pays for: consultation after hiring us, (before retaining us is free) preparation petition and schedules, means test & statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, email attachments, web uploads and mail; office appointment to review and sign your petition; filing your case in court. Excluded: appearance in any court or proceeding; taking calls from your creditors or bill collectors. If you decide to pre-pay, or pay for ALL services before and after we file your case in court, all work until case closing is included except: missed section 341 meetings; amendments to schedules; adversary proceedings; any motions including to reopen, avoid judgment liens, for enlargement of time; any contested matter including but not limited to objections to exemptions, motions to dismiss; attending rule 2004 examinations; reviewing documents that we did not specifically request from you; appearance other than bankruptcy court.  |
| Flat fee. With "flat fee", rather than hourly, you know in advance your entire cost unless additional work is required and it usually is cheaper, but you may choose to pay for our services billed hourly at \$75 -\$450/hour, and pay in advance a security retaier, which may cost you more, or less than a flat fee. Advance Payment Retainer. Payments on flat fee or hourly become our property on payment and are deposited into our operating account, not into a client trust account. We will only refund unearned fees You may enter into a security retainer agreement with another law firm: we will not because you may lose funds held in our trust account which may be assets in a Chapter 7.   |
| <b>Termination</b> . If you decide not to proceed, delay, fail to respond, fail to pay my attorneys or provide all information & sign my petition according to this schedule, I agree that Geraci Law may discontinue work and charge me for the work done to date at hourly rates shown above. We will only refund fees not earned. <b>Wisconsin</b> : We will submit any unresolved dispute about the fee to binding arbitration within 30 days of receiving written notice of the dispute. You may file a claim with the Wisconsin Lawyers' Fund for Client Protection if the we fail to provide a refund of unearned advanced fees. If you dispute the amount of the fee and want that dispute to be submitted to binding arbitration, you must provide written notice of the dispute to Geraci Law within 30 days of the mailing of the accounting. If we are unable to resolve the dispute to the satisfaction of you within 30 days after notice of the dispute from the client, we shall submit the dispute to binding arbitration.  |
| Time matters: You agree: to fully cooperate with us and provide all information required; use Client Corner and not to cause excessive work; that more than one attorney or staff will work on your file there is no extra charge for the entire Geraci Law Team, unlike single attorney "law firms". Change in circumstances: This flat fee is based on the facts you told us. If that changes, your fee may change. Exemption laws only protect a limited amount of property. File Chapter 13 if you have property not claimed as exempt, or risk turn over "non-exempt" property to a Trustee. No guarantee of Discharge Creditors or others may object to a chapter 7 discharge of certain debts or to any discharge, for a variety of reasons. Debts not discharged: student loans; educational debts and tuition; most tax debts; undisclosed debts; maintenance or support; fines; fraud, stealing or intentional injury claims, debts after filing including HOA dues; other debts listed in your green folder as usually not discharged. No discharge if you don't take the 2nd educational course. I will not transfer or acquire any property or incur any credit or debt before filing, and I must make full disclosure of all income, expenses, debts |
| te: 10 1071 17  Agricultura (Joint Debtor)  X  (Joint Debtor)  |
| Attorney for the Debtor(s), Representing Geraci Law L.L.C. rev 161112  |

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

| Barbara Lacretia Henderson / Debtor | Bankruptcy Docket #: |  |
|-------------------------------------|----------------------|--|
|                                     | Judge:               |  |

#### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 12/05/2017 /s/ Barbara Lacretia Henderson

**Barbara Lacretia Henderson** 

X Date & Sign

Record # 753156 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

## Document Page 49 of 58 In re Barbara Lacretia Henderson / Debtor

#### UNITED STATES BANKRUPTCY COURT

## NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

#### 1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

#### 2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

#### Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

Record # 753156 B 201A (Form 201A) (11/11) Page 1 of 2

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Form B 201A, Notice to Consumer Debtor(s)

In re Barbara Lacr

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

#### Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

#### Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

#### Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

#### 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 12/05/2017 | /s/ Barbara Lacretia Henderson |   |  |  |
|-------------------|--------------------------------|---|--|--|
|                   | Barbara Lacretia Henderson     | , |  |  |
| Dated: 12/05/2017 | /s/ Jon Kurt Clasing           |   |  |  |
|                   | Attorney: Jon Kurt Clasing     |   |  |  |

753156 Form B 201A. Notice to Consumer Debtor(s) Record # Page 2 of 2 Case 17-36180 Doc 1 Filed 12/05/17 Entered 12/05/17 17:07:18 Desc Main Document Page 51 of 58

|  | Barbara  | Lacretia He  | nderson  | Case Number (if kno   | wn)   |  |
|--|--|--|--|---|---|--|
| r 1  | First Name   |  | Name   |   |   |  |
|  | Three Ougstion   | s for Reporting Purposes   |  |   |   |  |
| t 6  | Answer These Question  |  | arily consumer del                               | its? Consumer debts are define  | ed in 11 U.S.C. § 101(8)  |  |
|  | Vhat kind of debts do rou have?  | as "incurred by an indiv   | idual primarily for a pe                         | rsonal, family, or household purp   | pose."  |  |
|  |  | Yes. Go to line 17.  |  |   |   |  |
|  |  | money for a business o   | or investment or throug                          | ts? Business debts are debts the highest the operation of the business of the | at you incurred to obtain<br>or investment.                       |  |
|  |  | LNo. Go to line 16c<br>☐Yes. Go to line 17   |  |   | ote.  |  |
|  |  | 16c. State the type of debts   | you owe that are not t                           | consumer debts or business deb  |   |  |
|  |  |  |  |   |   |  |
|  | Are you filing under<br>Chapter 7?   | No. I am not filing un   |  |   | nerty is excluded and   |  |
|  | Do you estimate that after   |  | Chapter 7. Do you es<br>cpenses are paid that f  | timate that after any exempt pro<br>unds will be available to distribu  | te to unsecured creditors?  |  |
|  | any exempt property is excluded and  | No.  |  |   |   |  |
|  | administrative expenses  | ☐Yes.  |  |   |   |  |
|  | are paid that funds will be<br>available for distribution<br>to unsecured creditors? | •  |  |   |   |  |
|  | How many creditors do  | <b>1</b> -49   |  | 00-5,000  | ☐ 25,001-50,000<br>☐ 50,001-100,000                               |  |
| ,.   | you estimate that you  | ☐ 50-99  |  | 01-10,000<br>001-25,000   | ☐ More than 100,000   |  |
|  | owe?   | ☐ 100-199<br>☐ 200-999   | _ 10,0   | 501 20,000  |   |  |
| TOTAL STREET   | U do vou   | \$0-\$50,000   |  | 000,001-\$10 million  | □\$500,000,001-\$1 billion  |  |
| Э.   | How much do you estimate your assets to  | \$50,001-\$100,000   |  | 0,000,001-\$50 million  | ☐\$1,000,000,001-\$10 billion<br>☐\$10,000,000,001-\$50 billion   |  |
|  | be worth?  | \$100,001-\$500,000  |  | 0,000,001-\$100 million<br>00,000,001-\$500 million   | ☐More than \$50 billion   |  |
|  |  | □ \$500,001-\$1 million  |  |   | □\$500,000,001-\$1 billion  |  |
| 0.   | How much do you  | \$0-\$50,000   |  | 000,001-\$10 million<br>0,000,001-\$50 million  | \$1,000,000,001-\$10 billion                                      |  |
|  | estimate your liabilities  | \$50,001-\$100,000   |  | 0,000,001-\$100 million   | ☐ \$10,000,000,001-\$50 billion                                   |  |
|  | to be?   | \$100,001-\$500,000  |  | 00,000,001-\$500 million  | ☐ More than \$50 billion  |  |
|  |  | □ \$500,001-\$1 million  | , ·  | 00,000,000  |   |  |
| Pa   | Sign Below   |  |  |   | the distance and  |  |
| Fo   | r you  | correct.   |  | er penalty of perjury that the info   |   |  |
|  |  | If I have chosen to file un<br>of title 11, United States (<br>under Chapter 7.                              | der Chapter 7, I am aw<br>Code. I understand the | rare that I may proceed, if eligibl<br>relief available under each chap   | e, under Chapter 7, 11,12, or 13<br>oter, and I choose to proceed |  |
|  |  | If no attorney represents this document, I have ob   | me and I did not pay o<br>ained and read the no  | r agree to pay someone who is titice required by 11 U.S.C. § 342  | not an attorney to help me fill out<br>(b).                       |  |
| (Accountable Accountable Accou |  | I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. |  |   |   |  |
| BANKS  |  | I understand making a fa<br>with a bankruptoy case of<br>18 U.S.C. §§ 152, 1341,                             | an result in fines up to                         | ling property, or obtaining mone;<br>\$250,000, or imprisonment for u   | y or property by fraud in connection<br>up to 20 years, or both.  |  |
| ANADOS POR SANDA MANAGAMAN ANADA  | Signature of Debto   | <u>i</u> Olenoon                                 | <b>⅓</b> Sign   | nature of Debtor 2  |  |
| Appendix on the contract of  | •  | Executed on :  | 2105 12017                                       | Exe   | cuted on  |  |
| ***************************************  |  | Executed on  | AM / DD / YYYY                                   |   | MM / DD / YYYY  |  |

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| Fill in this in   | Fill in this information to identify your case: |             |                        |  |  |  |  |
|---|---|-------------|------------------------|--|--|--|--|
| Debtor 1  | Barbara   | Lacretia    | Henderson<br>Last Name |  |  |  |  |
| Debtor 2<br>(Spouse, if filing)   | First Name                                      | Middle Name | Last Name              |  |  |  |  |
| United States Bankruptcy Court for the : <u>NORTHERN</u> District of <u>ILLINOIS</u> (State)  Case Number |   |             |                        |  |  |  |  |

## Official Form 106 Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign                   | n Below  |   |
|------------------------|--|---|
| Did you pay or         | r agree to pay someone who is NOT an attorney to help you fill out bank  | ruptcy forms?   |
| No Yes. Nar            | me of Person   | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
|                        |  |   |
| Under penalty correct. | y of perjury, I declare that I have read the summary and schedules filed | with this declaration and that they are true and  |
| <b>★</b> Mod Signature | Jua Monkey * Signature of Deb  | tor 2   |
|                        | <u>2 / O S /2017</u> Date MM / DD  | ) / YYYY  |

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| Debtor 1   | Barbara                | Lacretia    | Henderson | Case Number (if known)   |  |  |  |  |  |
|--|------------------------|-------------|-----------|--|--|--|--|--|--|
|  | First Name             | Middle Name | Last Name |  |  |  |  |  |  |
| Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.   |                        |             |           |  |  |  |  |  |  |
|  | No.                    |             |           | ***************************************  |  |  |  |  |  |
| Yes. Fill in the details.  |                        |             |           |  |  |  |  |  |  |
|  | Date issued            |             |           |  |  |  |  |  |  |
| Part 12: Sign Below  |                        |             |           |  |  |  |  |  |  |
| I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  18 U.S.C. §§ 152, 1341, 1519, and 3571.  Signature of Debtor 1  |                        |             |           |  |  |  |  |  |  |
| OCCUPANTA TO THE CONTRACT OF T | Date 12 / D S          | / YYYY      | Date      |  |  |  |  |  |  |
| Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?  |                        |             |           |  |  |  |  |  |  |
|  | No<br>Yes              |             |           |  |  |  |  |  |  |
| Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?  |                        |             |           |  |  |  |  |  |  |
| 000001;20000000000000000000000000000000  | No<br>Yes. Name of per | son         |           | Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119). |  |  |  |  |  |

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Part 2:

Lessor's name:

property:

property:

property:

property:

property:

property:

property:

Part 3:

Description of leased

Description of leased

Description of leased

Description of leased

Description of leased

Description of leased

Description of leased

Sign Below

Date Dated: 12/05 /2017

**List Your Unexpired Personal Property Leases** 

Describe your unexpired personal property leases

For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet

Will the lease be assumed?

☐ No

☐ No

☐ Yes

☐ No

Yes

| Debtor 1 | Barbara    | Lacretia    | <sub>не</sub> Document | Page 54s Ofun 8 (if know |
|----------|------------|-------------|------------------------|--------------------------|
|          | First Name | Middle Name | Last Name              |                          |

ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

#### Case 17-36180 Doc 1 Filed 12/05/17 Entered 12/05/17 17:07:18 Desc Main DISCLAIMER Debtors have read and agree

- Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entityin connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for fimily support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met: (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filling. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt. b. Failure to keep books and records documenting your financial affairs. c. Luxury purchases or cash advances within 60 days of filling or without intent or ability to repay. d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy. f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after, IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets
- 14. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAYE SURE OUR PETITION IS ACCUMATE!!

Dated: 12 1 0 5 /2017

Barbara Lacretia Henderson

X Date & Sign

Page 1 of 1 Asset Disclosure Record # 753156

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# UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Barbara Lacretia Henderson / Debtor

Bankruptcy Docket #:

Judge:

### **VERIFICATION OF CREDITOR MATRIX**

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 12 1 05 12017

Barbara Lacretia Henderson

X Date & Sign

Record # 753156

<sup>\*</sup> Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Form B 201A, Notice to Consumer Debtor(s)

In re Barbara Lacretia Henderson / Debtor

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found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

# <u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

## Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

## Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

## 3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: 12 / 05 /2017

Barbara Lacretia Henderson

X Date & Sign

Dated: 12 / 5 /2017

ev: Jon Kurt Clasing

Record # 753156

Form B 201A, Notice to Consumer Debtor(s)

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Decouliment \_\_\_\_ Page 58 of 5 mills [if known] \_ Lacretia Barbara Debtor 1 Last Name First Name Column A Column B Debtor 2 or Debtor 1 non-filing spouse 0.00 \$ 0.00 8. Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:.... For you ..... For your spouse ..... Pension or retirement income. Do not include any amount received that was a 0.00 0.00 \$ benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line10c. 0.00 0.00 10a. 0.00 \$ 0.00 10b 0.00 0.00 \$ 10c. Total amounts from separate pages, if any 11. Calculate your total current monthly income. Add lines 2 through 10 for each 4,203.23 0.00 \$ 4.203.23 column. Then add the total for Column A to the total for Column B **Determine Whether the Means Test Applies to You** Part 2: 12. Calculate your current monthly income for the year. Follow these steps: 4,203.23 12a. x 12 Multiply by 12 (the number of months in a year). 50,438.76 12b. 12b. The result is your annual income for this part of the form. 13. Calculate the median family income that applies to you. Follow these steps: IL Fill in the state in which you live. 4 Fill in the number of people in your household. 94,472.00 Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. X Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Sign Below Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Barbara Lacretia Henderson Date: 12 / 05 /2017 If you checked line 14a, do NOT fill out or file Form 122A-2. If you checked line 14b, fill out Form 122A-2 and file it with this form.

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